

Academic Fellow Membership

Member FULL NAME

Member Number |

(Leave BLANK if un-known)

ACADEMIC FELLOW MEMBERSHIP APPLICATION				
NOMINATOR INFORMATION				
Full Name:				
Title (Mr, Miss, Ms, Mrs, Dr/Prof):	Date of Birth:		
Home/Work Phone:	E-mail:	Member Number:		
NON	MINATED MEMBER INFOR	MATION		
Full Name of Chartered/Academ	ic Member you wish to nominate:			
Title (Mr, Miss, Ms, Mrs, Dr/Prof):			
Home/Work Phone:	Mobile:	E-mail:		
Briefly explain why you feel the named Member should receive recognition as an Academic Fellow Member of the LI:				
Please confirm if you are willing	to act as a proposer for the nomina	ted Member: (Yes/No)		
Signature of nominator:	Date:			
A Member does not have to be nominated, and can apply directly to be considered for election as an Academic Fellow Member. If there is no nomination, please move onto the next page – Proposers. Applications for Academic Fellow Membership is managed by the LI Fellowship Admissions Board. The Board is a panel made up of current Fellows and Academic Fellows. (You can submit an application at any time).				

ACADEMIC FELLOW MEMBERSHIP APPLICATION PROPOSERS Full Name of **Proposer one**: Must be a Fellow (FLI) Member of the LI Home/Work Phone: E-mail: Member Number: In what connection are you known to the nominated Member: Signature of Proposer one: Date: Full Name of **Proposer two**: Must be either a Chartered (CMLI) or Fellow (FLI) Member of the LI Home/Work Phone: E-mail: Member Number: In what connection are you known to the nominated Member: Signature of Proposer two: Date:

PROPOSER STATEMENT

Under the terms of the LI Charter in order for a member to be eligible for election to Academic Fellowship, the nominated Member must show that 'they have had responsibility for important work relevant to the field.'

The Landscape Institute's Fellowship Admissions Board requires evidence for the nominated Member meeting the following criteria:

- 1. Experience and performance in teaching or research, which should have been substantial and of outstanding quality:
- 2. Contribution to the Institute and/or to the understanding of the landscape, through advancing theory, philosophy, pedagogy or standards, external examinerships, participation in subject review or academic peer review; again, this should have been substantial.
- 3. Personal qualities and integrity, particularly qualities which are outstanding.

As a proposer, you are asked to provide a confidential statement to the LI with regards to your knowledge of their professional experience and personal integrity in relation to criteria 3 and at least one of criteria 1 and 2. This statement should be no more than **two pages of A4**.



It is therefore important that you know the nominated Member sufficiently well to be in a position to make a full and frank statement.

Within your statement, please comment on how long and in what capacity you have known the nominated Member and make a full and positive statement with regards to the criteria explained above. It would be particularly helpful to the Fellowship Admissions Board if you would bring out the applicant's personal qualities and achievements as fully as possible.

PLEASE FORWARD THIS APPLICATION TO THE NOMINATED MEMBER TO COMPLETE THE APPLICATION FORM AND RETURN TO THE LI.

ACADEMIC FELLOW MEMBERSHIP APPLICATION						
ACADEMIC FELLOW MEMBER APPLICATION						
Full Name:						
Title (Mr, Miss, Ms, Mrs, Dr/Pro	f):			Date of Birth:		
Current home address:						
City:	Cour	nty:	Po	Postcode:		
Home/Work Phone:	Mobile:			E-mail:		
L	AND	SCAPE AREAS OF PR	A(CTICE		
Which of the following LI Areas	of Pra	ctice best describes your in	ere	ests and knowledge:		
☐ Landscape Planning		Landscape Management		Landscape Design		
☐ Urban Design		Landscape Science		Other (Please state):		
ACADI	EMIC	QUALIFICATION IN	FC	RMATION		
University/College or Other Inst	itutior	1:				
Full name of course:						
Full title of qualification/level of	attair	nment: (BA, BSc, DipLA)				
Date awarded:						
Please attach copies of certifica You must include CERTIFIED T		LATIONS for any document	s v	which are not in English.	Ø.	
OTI	HER	ACADEMIC QUALIFI	C/	ATIONS		
University/College or Other Inst	itutior	1:				
Full name of course:						
Full title of qualification/level of	attair	nment:				
Date awarded:						
	EMF	LOYMENT INFORMA	XT.	ION		
Current employer:						
Job Title:						
Start Date: End Date:						
Main areas of responsibility:						
Please attach your most up-to-d	late C	V (in English)			1	

ACADEMIC FELLOW MEMBERSHIP APPLICATION

YOUR QUALIFIED STATUS AS A LANDSCAPE PROFESIONAL
Are you an EU National (Yes/No):
What nationality do you currently hold:
Provide details of any relevant awards, grants or prizes you have been awarded:
Provide details of any research your have undertaken, including papers/publications you have produced or contributed to:
Please provide the following evidence required with this application:
☐ Enclosed a CV detailing my relevant professional experience.
 □ Enclosed a portfolio of my most relevant professional work for the LI consideration, this should be no larger than A3 and no more than 20 pages. □ Enclosed a statement concerning my CPD (Continuing Professional Development), this should be no more than two pages of A4
\square Enclosed a personal statement in support of my application for Academic Fellowing, this should be no more than two pages of A4
OTHER MEMBERSHIP BODIES
Please provide details of any other relevant professional or membership bodies/socities, either in the UK or globally that you are a member of: You may include any designations or decorations you hold here.

	CITE			
If your application is successful, the details provided in your application, including your name, contact details and qualifications will be recorded on the LI CRM database. All information you provide will be used for processing your annual membership and supplying you with information about the LI and the landscape profession.				
Signature of applicant:	Date:			
Your name, membership category, member number, and date of joining the LI, will be published on the Member List 'Find a Member' on the LI website. Please sign that you agree to publish these details on the Members List. Additional information may also been shown, with your permission, via the password controlled Members' Area.				
Signature of applicant:	Date:			
I, the undersigned, being a Member, hereby apply for election as an Academic Fellow of the Landscape Institute. I declare that the statement made by me in support of this application are a true account of my professional standing, experience, education, and achievements.				
I further declare that I shall continue to be bound by the LI Charter, LI By-Laws and the LI Code of Conduct and that if elected as an Academic Fellow of the LI, I shall vigorously promote the LI to the best of my ability.				
Signature of applicant:	Date:			
I understand that the LI reserves the right to terminate my membership if I fail to pay my membership subscription on time.				
I further understand that I may terminate my membership at any time by giving written notice to the LI; if I choose to resign I will be invoiced for any outstanding membership fees relating to that part of the subscription year during which I remained a Member.				
Signature of applicant:	Date:			
MEMBERSHIP SUBSCRIPTION				
The LI Membership year runs from the 1 st June to 31 st May. Direct Debit is the easiest way to pay and helps your money go further to support the work of the Landscape Institute.				
You can choose to pay by 1 or 4 instalments. If your annual subscription fee is more than £100 you may pay by 12 instalments.				

DECLARATIONS

Direct Debits are collected on, or around, the 10th of the month.

To set up a Direct Debit, please complete and return the Direct Debit Mandate form.

LI MONITORING

The LI is committed to ensuring that the landscape profession is accessible to all sections of the community. We monitor the profile of our membership to ensure that the LI is compliant with equality and diversity legislation and that we catty out our work in accordance with best practice.

Please help us in this work by completing the section below. Your details will be stored on the LI's secure

database and will remain confidential.							
How would you describe your ethic origin:							
White		British	Mixed		White and Black Caribbean		
		Irish			White and Black African		
		Other			White and Asian		
					Other		
Black		Black British	Asian		Asian British		
		Black Caribbean			Asian Indian		
		Black African			Asian Bangladeshi		
		Other			Asian Pakistani		
					Asian Other		
Other		Arab					
		Other Ethic Group			Chinese		
		Prefer not to say			Other Asian Ethic Group		
Would you describe yourself as having a disability:							
Yes			No				
Please note that the LI may, from time to time, public reports on the overall profile of the membership. These reports will present data in aggregated form and will not be made available in any way which would enable you to be individually identified.							