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|  |  |  | **DOCUMENT(S) REQUIRED. PLEASE TICK AS APPROPRIATE** |  |
|  |  |  |  |  |
|  |  |  | **Letter / Transcript of academic record** |  |
|  |  |  |  |  |
|  |  |  | **Foundation Diploma certificate – duplicate**  |  |
|  |  |  |  |  |
|  |  |  | **Advanced Diploma certificate – duplicate**  |  |
|  |  |  |  |  |
|  |  |  | **Membership/ Fellowship certificate – duplicate** |  |
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|  |  |  |  |  |  |  |  |  |  |
| **PERSONAL DETAILS** |  |  |  |  |
| PLEASE WRITE CLEARLY IN CAPITAL LETTERS (Personal details as they appear on your passport) |
| Title (Please circle) | Mr | Mrs | Miss | Ms | Dr | Capt |  |  |
| Member/ Student number (if known)  |  |  |  |  |  |  |  |  |
|  |  |
| First Name |  |
| Middle Name (If applicable) |  |
| Family Name/Surname/Last Name |  |
| Date of Birth (dd/mm/yyyy) |  / / |  |  |
|  |  |  |
| **CONTACT DETAILS**  |  |
| Address |  |
|  |  |
|  |  |
| City |  | Postcode |  | Country |  |
|  |  |  |  |  |  |
| **Personal email address [mandatory]** |  |
|  |  |  |  |
| Home tel. |  |  |  |  | Mobile |  |  |  |
|  |  |  |  |  |  |  |  |  |  |
| First name and Surname as you wish it to appear on your certificate  |  | City of work |  |
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| **The Institute of Chartered Shipbrokers** | Warwick House 65-66 Queen StreetLondonEC4R 1EB |  | t. +44 (0) 20 7357 9722f. +44 (0) 20 7357 6348education@ics.org.uk  |

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| The administration fee is £42 per transcript document, Foundation or Advanced Diploma certificate.Membership/Fellowship certificate is £95 per certificate.*Note: This request will not be processed until payment has been received.**Please see below for payment options.***Payment options** |
| Please tick one of the following options.  |
|  |
|  | **Card payment** Please call us: +44 (0) 20 7357 9722 |  | **Bank transfer**Tick here if you would like to receive an invoice. Kindly use your invoice number as a reference for payment via bank transfer [BACS] |  | **Cheque** Please make your cheque payable to ‘Institute of Chartered Shipbrokers’and send it together with this form to our address. |  |
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| **Declaration**I declare that all information provided on this document and in any subsequent attachments is true and accurate to the best of my knowledge. |
| **The General Data Protection Regulation Privacy Policy**The Institute of Chartered Shipbrokers is committed to protecting your personal data and maintaining your privacy. The General Data Protection Regulation (GDPR) came into effect on 25 May 2018 and is a really positive step towards you having more control over how your data is stored, used and how you are contacted. The changes will also help protect your data. The Institute of Chartered Shipbrokers uses the personal data that you have shared with us for the purpose of your involvement as a student of the Institute. Students can log on to their profile in shipbrokers.org and view the data that we hold and update it any time. As a student of the Institute, you will receive some information from the Institute that is intrinsic to your education and exams (such as exam details and exam results) by post, email or telephone. The below opt in boxes allow you to manage what and how you receive other communications from us. Your data may be shared with your local Institute branch, teaching centre and exam centre as applicable, and our third party logistics provider for the purpose of distributing our magazine Shipping Network and other Institute publications. Your data will not be shared with any other third party without your express permission. Our new Privacy Policy is effective from 25 May 2018 and can be viewed at [www.ics.org/about-us/privacy-policy](http://www.ics.org/about-us/privacy-policy)                I would like to receive email communications from the Institute of Chartered Shipbrokers which may include newsletters, invitations to events and information about the Institute                I would like to receive communication by post from the Institute of Chartered Shipbrokers which may include the Shipping Network magazine, the Institute Annual Report and other information from the Institute |
| Date \_\_ \_\_ / \_\_ \_\_ / \_\_ \_\_ Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

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