



## STUDENT MEMBER APPLICATION FORM

1. Surname Ms/Miss/Mrs/Mr ..... (“The Applicant”)
2. Given Names .....
3. Previous Names (if applicable) .....
4. Residential Address ..... Telephone .....
- Email Address.....
5. Course Provider.....
- Address.....
- .....
- .....
6. Name of Course.....
7. Commencement Date .....
- Proposed Completion Date.....
8. Current Employment in conveyancing industry (if applicable) Full Time / Part Time / Casual
9. Current Employer.....
10. Employer’s Address.....
- .....
11. Current Position .....
12. Current Responsibilities .....
- .....

I, the Applicant, undertake to advise the AIC (Vic Div) when I have completed my course.

Signed:.....

Dated:.....

Australian Institute of Conveyancers (Vic. Div) Inc  
Level 1, 551 King Street West Melbourne 3003

PH: 03 9328 8175

Fax: 03 9328 8290

Email: [admin@aicvic.com.au](mailto:admin@aicvic.com.au)

Website: [www.aicvic.com.au](http://www.aicvic.com.au)