## Concessionary fee application form





In certain circumstances a member or an individual interested in joining may apply, by reason of on-going hardship circumstances, for a reduction on their CQI membership subscription fees. Complete and return this form, together with evidence, to apply.

Name	Membership Number	Membership Number	
Address	Email address		
	Date of birth		
Postcode	Contact number	Contact number	
Please tick to indicate your circu	mstances		
Unemployed (evidence required) Long-term III-Health (evidence re Maternity/Paternity leave (evidence Full-time student studying Quality Retired Retired Netired with Chartered Status (C) Other (please specify and provide	quired) te required) (evidence required) PD declaration required) e evidence)		
I confirm that I am currently in hard I have also included current evidence	Iship circumstances and not in paid employment. se where required.		
Signature	Date		
10 Furnival Street, London, EC4A 1A Once this Form has been received a	nd processed, the CQI will be in contact to confirm for members whose application is for a retired conces	n the outcome, including	
For internal use only			
Date Received	Approved?		
Length of membership	Date		
Previous concessions?	Signed Membership Manager		
I of I: Retired CPD declaration form		quality.org	