



**THE TANZANIA INSTITUTE OF ARBITRATORS
(TI Arb)**

APPLICATION FOR MEMBERSHIP

(Please type or write in block capitals)

In accordance with the TI Arb constitution, entry into membership of the Institute is normally through the grade of Associate member. A candidate for membership must satisfy the council that she/he is in all respects a fit and proper person for admission to the Institute, is engaged in a profession, occupation or calling in which recourse to arbitration is directly or indirectly involved, and must have passed an examination accepted by the Council or have such knowledge and experience of the law and practice of arbitration as the Council may approve. In some circumstances a candidate may be called for interview by the Council.

PART A - PERSONAL PARTICULARS

1. Surname
 - Other Name(s)
 - Title (if any)
 - Date of Birth
 - Nationality
 - Address (Office)
 -
 -
 - Telephone No. Fax No. E-Mail
 - Address (Residence)
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 - Telephone No. Fax No. E-Mail
2. Principal Profession or Occupation (to be stated in full)

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 Present Post or Appointment
 Name and Address of Employer
 Nature of Business of Employer

3. Please state if you made any previous application for TI Arb Membership.

YES/NO Date

If YES what was the outcome?

PART B – ACADEMIC AND PROFESSIONAL QUALIFICATIONS

Please give details of appropriate technical, academic and professional examinations passed. It would help to expedite progressing of your application if you would attach certified copies of certificates.

| | | | |
|----|----------------------|-------------|---------------------------|
| 4. | Title of Examination | Date Passed | Grade Where applicable |
|----|----------------------|-------------|---------------------------|

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5. Membership of Professional or Occupational Institutions (and Divisions where appropriate)

| | | |
|---------------|---------------|-------|
| Title of Body | Date Admitted | Grade |
|---------------|---------------|-------|

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PART C – KNOWLEDGE OF ARBITRATION

6. Knowledge of arbitration and how acquired. (To include details of arbitration courses attended/arbitration exams passed and arbitration books studied).

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7. Practical experience if any as an Arbitrator/Expert Witness/Advocate in Arbitration etc

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PART D – REFEREES

Every candidate for election shall provide two referees who must have known him professionally for a number of years. An approach will be made to the referees by the Secretary of the Institute.

8. First Referee:

Name

Address

.....

Second Referee:

Name

Address

.....

PART E – ATTACHMENTS AND DECLARATION

9. I attach the following certified true copies of certificates and documents in support of this application for membership.

Copies

.....

10. Declaration

I declare that the particulars provided here above are true and if admitted I agree to comply with the Bye-Laws of the Institute and with any subsequent amendments and/or alterations thereof which may be made and with any Regulations made or to be made for carrying them into effect.

Signature Date

11. On completion of all preceding sections of this application it should be sent, together with such supporting documents (copies only, they will not be returned to the candidate) to:

Honorary Secretary
The Tanzania Institute of Arbitrators
P.O. Box 76890
DAR ES SALAAM.

Together with a payment made to:

The Tanzania Institute of Arbitrators for Tsh **210,000/=**

This amount covers the following:-

Covering nonrefundable Application Tsh 10,000/=

Membership fee of Tsh 100,000/=

Annual Subscription of Tsh 100,000/=

Payment to be made through the following details;

CRDB Bank

TZS Account No: 01J1020062301

USD Account No: 0250020062300

Account name: Tanzania Institute of Arbitrators

Or M-pesa paybill No 52055217

Name: Tanzania Institute of Arbitrators

PART F – FOR OFFICIAL USE

Reference No Received

ACCEPTED QUALIFICATION

COUNCIL DECISION Approved Not Approved

Council Meeting No. Date:

Membership category

Membership Number

Certified

Hon. Secretary