

IT IS ESSENTIAL THE APPLICANT READS THE DISTINCTIONS HANDBOOK PRIOR TO APPLYING.

DO NOT SEND THIS APPLICATION FORM WITH YOUR PORTFOLIO (EXCLUDES CD APPLICATIONS).

FOR OFFICE USE ONLY

Decision:

Received:

Method of Payment:

Chairperson's Signature:

Method of Return:

Return Postage:

Number Tickets Requested:

Portfolio Received:

Hanging Plan:

Statement:

1. PERSONAL DETAILS

Surname:

Mr/Dr/Mrs/Miss/Ms:

First name(s):

Address:

Postcode:

Telephone Number: Home

Work

Email Address:

Date of Birth:

Occupation:

Current Distinction:

Date gained:

Society Membership Number:

Category:

Format: **Prints/CD/Slides: 35mm, 6 x 6/Other**

Name to appear on certificate:

Date of assessment:

EXEMPTION APPLICATION PLEASE ONLY FILL IN SECTIONS 1, 3, 9, 10, 12 AND 13

2. PREVIOUS DISTINCTION APPLICATIONS

If possible please enclose with this form a copy of the comment sheet(s) from any previous unsuccessful application.

3. PHOTOGRAPHIC EXAMINATIONS (LIST ANY PHOTOGRAPHIC QUALIFICATIONS HELD)

4. SUPERVISION OR GUIDANCE

Please indicate with which of the following aspects you have received assistance:

Selection of subject*	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Composition of final print	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Retouching	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Photography	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Mounting	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Digital Manipulation	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Negative processing	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Presentation	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Printing	Yes <input type="checkbox"/>	No <input type="checkbox"/>

(*i.e. was the situation unique to you or was it taken in a group context? Photographs which have clearly been taken in a group situation will be judged less favourably).

If YES to any of the above please give full details of the assistance involved and names of persons/organisations who have contributed (please include on a separate sheet).

5. PORTFOLIOS

Note: The CD should normally be sent in advance with the application form.

Wherever possible, we would like a CD copy of portfolios submitted as digital prints to keep as a record. The CD may be used for training purposes. Please mark the CD 'Copy for Reference'

CD enclosed

My portfolio will be sent to Bath

I wish to bring my portfolio on the day of assessment (not CD)

6. RETURN OF WORK

Note: CD submitted will not be returned unless specifically requested

UK MAINLAND ONLY (extra charge for Scottish Highlands, please e-mail distinctions@rps.org for prices)

Special Delivery (slide submissions £6.00)

Interlink (£15 up to 10kg)

Personal collection

OVERSEAS & NON UK MAINLAND ONLY

Interlink (with insurance)

Other (please specify)

Please state if non return

SBS (no insurance)

Overseas applicants Please include credit card details for payment of return postage. Payment will be debited from your credit card for the return of your portfolio up to the value of £70. If postage is over £70 your authorisation will be requested.

All reasonable care will be taken of evidence submitted but The Society will not be responsible for any loss or damage whilst in its care or in transit.

7. RETENTION OF WORK

The Society may decide to retain the evidence for six months beyond the date of assessment. This is to enable it to be copied and used for helping other potential applicants, for inclusion in a Society publication without payment of fee, or for use on The Society website.

Do you give your consent?

Yes

No

8. ADVISORY/ADVICE

Have you attended an RPS Workshop?

Location of workshop

Had "one to one help"?

Name of Advisor

Had advice from being a member or attendee of a Distinctions Group?

Name of Group

Had advice or help from any source other than the above?

Name of Group

Have you attended/completed any Photographic Courses?

Please state

Have you gained other Distinctions or qualifications e.g. PAGB, DPA, IPA, WPA?

Please state

9. I AGREE TO ABIDE BY THE RULES OF THE SOCIETY AND ACCEPT THAT THE DECISION OF THE PANEL IS FINAL.

Signature of Applicant:

Date:

10. DECLARATION

Copyright: In the event of copyright clearance of any kind being required, the responsibility for such clearance remains with the applicant. Disclosure is required on a separate sheet if library material free of copyright has been incorporated. Please confirm that you own the copyright of the work in question.

.....
Signature of Applicant:

.....
Date:

I confirm that the above information is correct and, if I am awarded the Associateship, I undertake immediately, should I cease to be a paid up member of The Society to return the Certificate and no longer use the letters ARPS.

.....
Signature of Applicant:

.....
Date:

The Society reserves the right, if it is considered desirable, to seek further information before assessing the application. The giving of false information will nullify any Distinction that may otherwise have been awarded.

11. CHECK LIST

- Application Fee enclosed Statement of Intent (must be sent with portfolio)
All relevant sections completed
Return Postage cost included – see Returning your Portfolio in ‘Distinctions and Qualifications Information Booklet’
Membership Details and Payment included (if not already a member)
A4 Hanging Plan (must be sent with portfolio). This will be kept for office reference.

12. NON-MEMBER APPLICATIONS

(This section must be completed by all non members)

Would you like to become a member of The Society regardless of the outcome of the Panel meeting? Yes No

Membership £108

Member 65 and over £80

Family Membership £158

Overseas Membership £95

Disabled (enclose proof of status) £52

Full time Students/25 and under (enclose proof of status) £52

I enclose a cheque made payable to The Royal Photographic Society for

(Please send separate cheques for Membership and Distinction applications)

I authorise The Royal Photographic Society to debit my Visa/Mastercard/Switch Card for the sum of

Card Number:

CSV (3 digit security code)

Mastercard Visa Cheque *Switch

Start Date & Expiry date:

*Issue Number:

I understand that if my Associateship application is successful my membership will automatically be processed. If it is not successful I shall have the option either of allowing my membership application to be processed or of having the Annual Subscription refunded. I understand that my Associateship application fee will not be refunded.

.....
Signature of Applicant:

.....
Date:

13. PAYMENT

I enclose a remittance/authorise you to charge my credit card to cover the following:

Associateship Application Fee			£75
Resubmission Fee (once only)			£37.50
Exemption Fee/Full time Student/25 and under (proof of status required)			£37.50
Return Postage - please complete with appropriate sum			<input type="text"/>
Assessment Ticket for Applicant - only one - do you require a ticket?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Free
Assessment Ticket for Guest(s) - how many do you require?	<input type="text"/>	£5 per ticket	<input type="text"/>
		TOTAL	<input type="text"/>

Card Number: **CSV (3 digit security code)**

Mastercard Visa Cheque *Switch

Start Date & Expiry date: ***Issue Number:**

Overseas applicants are requested to make payment in sterling by means of a credit card, an International Money Order or Bankers Draft drawn on a UK Bank.

ON RECEIPT OF THIS APPLICATION FORM A LETTER OF CONFIRMATION WILL BE SENT TO THE ADDRESS STATED IN SECTION 1.

THE DISTINCTIONS DEPARTMENT

The Royal Photographic Society

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