**SoRSA Membership/Upgrade including International Membership**

**Application Form**

Applicants should complete the form as stipulated for the various levels of SoRSA membership, see page 2 or the SoRSA webpage <https://www.ciht.org.uk/sorsa/join-sorsa/>.

Once completed this application form should be submitted by email to [membership@ciht.org.uk](mailto:membership@ciht.org.uk).

1. **Applicants Personal and Contact Details**

|  |  |  |  |
| --- | --- | --- | --- |
| **Title:** |  | **Surname:** |  |
| **Forename(s):** |  | | |
| **Company/Authority:** |  | | |
| **Work Address:** |  | | |
| **Job Title:** |  | | |
| **Country in which you are working if NOT the UK:** |  | | |
| **Preferred Contact Telephone No:** |  | | |
| **Contact email address:** |  | | |
| **Brief description of responsibilities:** |  | | |

|  |  |  |  |
| --- | --- | --- | --- |
| **Grade of Membership being applied for (***Please mark as appropriate)* | | | |
| Fellow |  | Associate |  |
| Member |  | Affiliate |  |

*For details of Membership Grades, see overleaf.*

*If you are applying for Affiliate Membership of SoRSA only, please complete the above Personal and Contact Details above and the Declarations and Payments sections only.*

*Version August 2019*

**Membership Grades**

**Affiliate Applications**

Please complete sections 1, 2 and 3 as a minimum. Experience in the field is not required and this information is requested only to assist SoRSA in developing new member services. For section 2, please note that brief details are all that are required.

**Associate Applications**

Please complete sections 1, 2 and 3 as a minimum. The details supplied should show to the SoRSA Membership Committee how you meet the requirements of an Observer under the latest DMRB guidance “Road Safety Audit” – one year’s accident investigation /road safety engineering experience and 10 days formal training (which can be made up from a number of formal road safety training courses). Section 2 does not require 300 words per box and should simply identify how you meet the requirements for this grade of membership. For example, the road safety audit experience box may simply state “None”.

**Member Applications**

Please complete all sections. You ensure that you have provided sufficient information for the SoRSA Membership Committee to satisfy them that you comply with the requirements for road safety audit team leader or team member. Applications for SoRSA membership will be assessed against in-depth criteria which may not reflect the standards against which all currently practising auditors will have been assessed.

**Fellow Applications**

Please complete all sections, with the exception of sections 5 & 6 as the information requested should be included in the report submitted as part of your application (as detailed below). You should ensure that you have provided sufficient information for the SoRSA Membership Committee to satisfy them that you have surpassed the requirements for road safety audit team leader.

Applicants for Fellow must also submit a separate 2000-word report on their road safety audit experience. The report will reflect your high level of experience in road safety audit, accident investigation or road safety engineering, leading audit teams on large, complex audits and recommending interesting or innovative solutions to identified problems. You should additionally demonstrate that you have proven ability and have made a significant contribution to the profession. As a senior member of the profession, a candidate would have reached a pinnacle of career distinction within the field of road safety audit.

**All Applicants**

The applicant should include in the submission a copy of a Road Safety Audit report written by them in the last 24 months. The report should contain a minimum of 6 problems (this number of Problems may be made up by submitting a maximum of 2 reports). It should be noted that supporting information in the form of an Audit Brief as well as scheme general arrangements and signing and lining details as a minimum will also be required. The applicant should ensure that the Audits submitted for consideration will allow the Reviewers to assess the candidate’s suitability for this grade of membership of SoRSA It should be noted that all information for this assessment will be treated in strict confidence.

NB Member and Fellow grades are awarded subject to an Annual Review.**2. Professional Institution Membership**

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| --- | --- | --- |
| Are you currently a Member of CIHT? *Delete as applicable* | Yes | No |
| If you are a Member of CIHT, what is your Membership Number? |  | |

|  |  |  |
| --- | --- | --- |
| Are you currently a Member of SoRSA? *Delete as applicable* | Yes | No |
| If you are a Member of SoRSA, what is your current grading? |  | |

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| --- |
| **Please provide details of memberships of other professional Institutions, including your grading and date of election.** |

1. **Professional Qualifications**

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| --- |
| **Please provide details of your professional qualifications, including awarding body and date of award.** |

1. **Certificate of Competency**

|  |  |  |
| --- | --- | --- |
| **Do you hold a Certificate of Competency?** *(delete as appropriate)* | Yes | No |

**5. Background Experience**

Please provide a short resume (maximum 500 words) demonstrating **how your existing training, skills and experience meets with the latest DMRB guidance “Road Safety Audit” requirements or to the local Standard applicable in the County/Country in which you are working.** CVs or continuation sheets are NOT acceptable. Please provide a copy of your local standard, in English, if not working to DMRB.

*Persons applying for the Fellow membership grade of SoRSA do not need to provide this resume. This information should be referred to in your 2000-word report.*

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1. **Collision Investigation and Road Safety Engineering**

Please provide a short resume (maximum 500 words) of your **Collision Investigation and/or Road Safety Engineering experience** **as defined in the latest DMRB guidance “Road Safety Audit” or to the local Standard applicable in the County/Country in which you are working**. Please include dates and identify duties undertaken. This section must demonstrate your competence for the grade of membership applied for. CVs or continuation sheets are NOT acceptable.

*Persons applying for the Fellow membership grade of SoRSA do not need to provide this resume. This information should be referred to in your 2000-word report.*

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1. **Examples of Collision Investigation/Road Safety Engineering projects.**

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| --- | --- | --- | --- |
| You must show how you meet the guidelines defined in the latest DMRB guidance “Road Safety Audit” document in regard to collision investigation/road safety engineering experience in the last 24 months **or to the local Standard applicable in the County/Country in which you are working.** | | | |
| **Scheme Name and Client** | **Date** | **Type of Project\*** | **Summary of work undertaken, no. of collisions and outcomes (max. 150 words per scheme)** |
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**\*Please state if local safety scheme, forensic collision investigation, part of a transport assessment, road safety research etc.**

SoRSA may request a copy of any of the reports listed above if they deem it necessary to validate your experience.

1. **Formal Road Safety Training**

**Copies of Certificates of attendance are required for formal training.**

|  |  |  |  |
| --- | --- | --- | --- |
| **Formal Courses\* in Road Safety Audit/Collision Investigation and Prevention/ Road Safety Engineering** | **Days / Hours** | **Date** | **Organiser** |
|  |  |  |  |
|  |  |  |  |

**\*Formal courses do not include seminars, conferences, exhibitions and the like. Please use a continuation sheet if you need more space to demonstrate a total of 10 days formal training if required. Formal training is that which will meet directly the requirements set out in the latest DMRB guidance “Road Safety Audit” or to the local Standard applicable in the County/Country in which you are working**.

1. **Continuing Professional Education**

Where appropriate copies of Certificates of attendance and lessons learnt reports should be provided, template attached. **Self-reading will NOT be accepted as suitable CPD unless it is structured with, and agreed by, the Applicants Line Manager listing relevant topics and lessons learned. A copy of the signed agreement is to be provided.**

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| **Other Road Safety Audit/Collision Investigation and Prevention/Road Safety Engineering CPD undertaken in the last 12 months. Minimum of 2 days or 12 hours required.** | **Days** | **Date** | **Organiser** |
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1. **For the purposes of this application, the CPD must conform with the conditions set out in the latest DMRB guidance “Road Safety Audit”** **or to the local Standard applicable in the County/Country in which you are working.**
2. **Please use a continuation sheet if you need more space to demonstrate that you have achieved a minimum of 2 days relevant CPD in the last 12 months.**

**CPD Lessons Learnt Report**

|  |  |
| --- | --- |
| **Title of document/ seminar etc.** |  |
| **Company presenting or document reference** |  |
| **Date of CPD** |  |
| **No. of approved CPD hours** |  |
| **Summary of document/ seminar etc.** |  |
| **Lessons learnt for CPD** |  |

**Signed by Applicant:**

**Signed by Line Manager:**

1. **Road Safety Audits**

List a minimum of **5 Road Safety Audits** at a range of stages, undertaken **in the last 24 months**.

Applicants must provide a copy of one of the listed Audit reports, with supporting information for review. The applicant **must ensure that the Audit submitted is written by them and contain a minimum of 6 Problems identified (you may provide a maximum of 2 reports to achieve this number of Problems).**

Applicants should be aware that the information provided must be sufficient for the SoRSA Membership Panel to assess their ability as a Road Safety Auditor. Problem identification and recommendations should be clearly defined. Checklist attached.

SoRSA reserves the right to request the provision of additional examples of your Audit work. Any additional examples requested will be drawn from the information you provide.

SoRSA will respect Client confidentiality.

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| --- | --- | --- | --- | --- |
| **Scheme Name and Client** | **Date** | **Leader / Member / Observer** | **Stage** | **Brief description of scheme and notable issues raised (approx. 50 – 100 words per scheme)** |
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**Applicant Checklist prior to submission**

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| **Does your Road Safety Audit report include the following?** | **Yes or No (if no provide details)** |
| Inclusion of Table D1 (GG119) |  |
| Identification of the RSA Stage including a unique reference document number and any details of revisions |  |
| A brief description of the highway scheme including details of its location and objective |  |
| Details of who supplied & approved the audit brief, who approved the audit team. |  |
| Did the RSA team formally accept the brief? (Statement in the RSA introduction report) |  |
| Was the process followed for third party lead RSA’s? if applicable |  |
| Identification of the RSA team membership, as well as the names of other contributing such as the Police, maintaining Agent, specialist advisors |  |
| Identification of Certificate of Competence accreditation |  |
| Details of who was present at the site visit, the date and time period(s) when the visit was undertaken, site conditions, weather, pedestrians, cyclists) |  |
| The terms of reference of the RSA (Copy of relevant standard to be provided in English if not GG119) |  |
| Has a review of any previous RSA been carried out and actions noted? |  |
| The Audit team statement as given in GG119 Appendix D or to the terms identified earlier |  |
| A list of the documents and drawings provided with the audit brief |  |
| A clear location plan based on a scheme plan, marked up and referenced clearly to the problems in the report and photographs, if available |  |
| **Road Safety Audit Report Problems and Recommendations?** | **Yes or No (if no provide details)** |
| The RSA report shall contain a separate statement for each identified road safety problem describing the location and nature of the problem and the type of collisions. |  |
| The RSA team shall provide proportionate and viable RSA recommendations to eliminate of mitigate the identified RSA problem. Recommendations shall not use the words ‘consider’ and ‘must’. |  |
| The RSA team shall not include any issues in the RSA report that have no implications of road user safety or any other items not covered by the RSA brief. |  |

1. **DECLARATIONS**

**IMPORTANT UNDERTAKING TO BE SIGNED BY THE APPLICANT**

I declare that the information as to my qualifications and work experience submitted with this application form is, in every respect, complete and accurate.

If I am applying to join SoRSA by the non-CIHT Membership route, I confirm that I agree to be bound by the rules and codes of conduct of the Chartered Institution of Highways and Transportation (CIHT).

Applicant’s Signature …………………………………………………… Date ......................................

1. **IMPORTANT UNDERTAKING TO BE SIGNED BY THE APPLICANTS SPONSOR**

Applications for membership of SoRSA must be sponsored by a current Member or Fellow of SoRSA or an individual recognised in the profession, e.g. a chartered member of an Institution registered with the Engineering Council. **The sponsor must be willing to vouch for the abilities of the candidate to meet the requirements of the grade applied for and may be contacted by the SoRSA Membership Secretary as part of the application process.**

I confirm that the evidence and information provided by ............................................................in this application is complete and true to the best of my knowledge.

I also confirm that ....................................................... has undertaken the Road Safety Audits and other activities/projects highlighted in this application.

Sponsors Name: ..............................................................

Sponsors Signature: ......................................................... Date: ...............................................

Sponsor Contact Details *(Telephone and/or e-mail address*:

.......................................................................................................................................................

1. **PAYMENTS**

**Cost of SoRSA Membership (as of 1st January 2021)**

**Membership of SoRSA at all grades is free for CIHT members.**

Non-CIHT members are welcome to become members of SoRSA.  An **annual** fee of £106 applicable (£81 registration plus £25 admin fee).

**Payment methods:**

- Online: email CIHT at: [membership@ciht.org.uk](mailto:membership@ciht.org.uk)

- By phone: call CIHT on 020 7336 1555 (option 1) so that we can arrange payment.

- Direct Debit: contact CIHT on either of the above to set up a payment (nb Direct debits are taken in full each year, there is no monthly instalment option.)

- Cheque: We still accept cheque payments, made payable to CIHT. Please clearly state your name and CIHT ID number on the reverse. Cheques should be sent to: CIHT; 119 Britannia Walk; London; N1 7JE.

If you wish to become a member of CIHT and therefore enjoy free SoRSA membership, please see this [link.](https://www.ciht.org.uk/become-a-member/ciht-membership-for-individuals/member-mciht/)

**Authorisation:** I give my permission for CIHT to hold the information provided in this form on its membership database

I declare that the information as to my CPD and current work experience submitted with this form is, in every respect, complete and accurate.

Applicant’s Signature ………………………………………………………… Date…………………

**To have your name added to the SoRSA Register of Members/Fellows**

**CLICK HERE**

**NOTES**

**Appeals**

Any applicant offered a grade of SoRSA membership other than that applied for is entitled to appeal against that decision.

The appeals procedure is the same as that for CIHT membership and includes a member of the SoRSA Membership Committee on the Appeals Panel.

**Sponsorship of Application**

Applications for membership of SoRSA must be sponsored by a current Member or Fellow of SoRSA or an individual recognised in the profession, e.g. a chartered member of an Institution registered with the Engineering Council. **The sponsor must be willing to vouch for the abilities of the candidate to meet the requirements of the grade applied for and may be contacted by the SoRSA Membership Secretary as part of the application process.**

**SoRSA Membership**

As a SoRSA Member or Fellow you will be audited by the SoRSA membership committee on an annual basis to ensure that you continue to meet the requirements of the grade of membership to which you have been elected. The review is undertaken annually commencing in **January** and is a requirement of continuous membership. All members of greater than 12 months standing will be required to undergo the review process which is managed and coordinated by the SoRSA Membership Secretary.

It is not necessary for applicants to be members of CIHT, however, those joining SoRSA via the non-CIHT route are bound by the rules and codes of conduct of the Chartered Institution of Highways and Transportation (CIHT).

**Definitions**

**Road Safety Engineering:** The design and implementation of physical changes to the road network intended to reduce the number and severity of collisions involving road users, drawing on the results of Collision Investigation.

**Collision Investigation:** The collection and examination of historical collision data over a period of time in order to identify patterns, common trends and factors which may have contributed to the collisions.

**Continuing Professional Education: -** ‘The systematic maintenance, improvement and broadening of knowledge and skills, and the development of personal qualities, necessary for the execution of professional and technical duties throughout the practitioner’s life.’ See <http://www.ciht.org.uk/en/education-training/continuing-professional-development/> for full details on what constitutes CPD.

**Queries**

If you have any queries regarding the application process or requirements, please contact the SoRSA Membership Secretary on [sorsa@ciht.org.uk](mailto:sorsa@ciht.org.uk).