INSTITUTE OF CONSTRUCTION
CLAIMS PRACTITIONERS

Details of Claims Experience

Please **complete and sign** this form, have it signed by your referee and return a copy with your membership application.

Applicant's name:	

Example

From (mm/yy)	To (mm/yy)	Years - Months	Job Title	Company Name / Type	Claims Experience Including Role and Responsibility
02/13	04/16	3-2	Contracts Manager	BBO Construction / Contractor	Preparation of contractor's claims for variations, extensions of time and additional payment. Assessment of subcontract claims and preparation of awards and determinations. Liaise with and assist lawyers in preparation of case for arbitration proceedings. Management and supervision of staff dealing with contractual matters and claims for all company projects.

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Please add more rows if necessary.

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Please add more rows if necessary.

From (mm/yy)	To (mm/yy)	Years - Months	Job Title	Company Name / Type	Claims Experience Including Role and Responsibility

Applicant's signature:	
Date:	

Referee's signature:	
Date:	