



**INSTITUTE OF CONSTRUCTION
CLAIMS PRACTITIONERS**

**Professional Profile
Registration Form**

Name:		Contact Number:	
Designation:		Email:	
Qualifications:			

Years of Experience (Please enter 'X' under the relevant category)			
10 – 20 years	20 – 30 years	30 – 40 years	40+ years

Industry Specialities (Please enter 'X' next to all that apply)			
Arbitration		Architecture	
Claims		Contracts Management	
Cost Consultancy		Design	
Engineering		Legal	
Quantity Surveying		Planning & Project Controls	
Project Management		Other	

Industry Sectors in which you have significant experience (Please enter 'X' next to all that apply)			
Building		Civil Engineering	
Infrastructure		Oil & Gas	
Marine Engineering		MEP	
Pipelines		Legal	
Process Plants		Roads & Bridges	
Other			



Please use this space to type or copy and paste your professional profile (maximum 500 words):

DISCLAIMER

By submitting this form, I confirm that:

- a) Information provided herein is accurate and up to date and;
- b) The ICCP has my permission to use all information to create my online Professional Profile on the the ICCP website.