**SoRSA Fellow and Member Annual Review Form 2021**

Applicants should complete the form as stipulated for renewal of their SoRSA Fellow and Member grading.

Once completed this application form and all other documents should be submitted to [**sorsa@ciht.org.uk**](mailto:sorsa@ciht.org.uk)

The following information which should be read in conjunction with the annual review form can be found on the SoRSA website<https://www.ciht.org.uk/sorsa/join-sorsa/> under Annual Review:

1. Lesson Learnt Forms
2. Applicant Checklist
3. Cost of Renewing your SoRSA Membership
4. Failure to Comply with Requirements

**If you undertake Road Safety Audits to a standard other than GG 119 you must provide a copy of that standard with this form.**

**Forms and all required documentation are to be submitted by**

**Midnight on Wednesday 31st March 2021**

**1 Applicants Personal and Contact Details**

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| --- | --- |
| Name: |  |
| Company/Authority: |  |
| Contact email address: |  |

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| --- | --- | --- | --- |
| **What is your current SoRSA Membership grade?** *(Please mark with an X as appropriate)* | | | |
| Fellow |  | Member |  |

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| --- | --- | --- |
| Are you currently a Member/Fellow of CIHT? *Delete which is not applicable* | Yes | No |
| If you are a Member/Fellow of CIHT, what is your current Membership Number? |  | |

|  |  |  |
| --- | --- | --- |
| Have you a [Certificate of Competency](https://www.ciht.org.uk/sorsa/certificate-of-competency/)? *Delete which is not applicable.* | Yes | No |

|  |  |  |
| --- | --- | --- |
| Would you like your name added to the SoRSA Register of Members which is available on the website? *Delete which is not applicable* | Yes | No |

**2 Confirmation of payment of fees**

Applicants must supply a copy of their receipt showing they have paid their CIHT Membership fees for 2021 (receipts are available from your MyCIHT page) or that they have paid the required annual fee if they are NOT a Members of CIHT.

**3 Road Safety Audit**

List **5 Road Safety Audits ideally showing a range of differing stages and scheme types undertaken in the last 24 months** as either an Audit Team Leader or Audit Team Member.

Applicants must provide a copy of one of the listed Audit reports for review. Applicants should be aware that the information provided must be sufficient for the SoRSA Review Panel to assess their ability as a road safety auditor. **The applicant should ensure that the Audit submitted is written by them.**

The report should contain **a minimum of 6 different types of Problems** (a maximum of 2 reports may be submitted to achieve this number of problems).

Where the road safety audit report does not fully conform to latest DMRB Standards “Road Safety Audit” (for example where it is written to a local authority standard), please state below how this Standard differs from the latest DMRB guidance “Road Safety Audit”; i.e. no Problem Location Plan required; no night-time site visit required for Stage 3 RSA.)

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 below. SoRSA will respect Client confidentiality.

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|  | **Scheme Title** | **Brief description of scheme and notable issues raised (approx. 50 – 100 words per scheme)**. | **How does this audit differ from latest DMRB Standard** | **Date** | **Audit Stage** | **Role TL/TM** |
| 1 |  |  |  |  |  |  |
| 2 |  |  |  |  |  |  |
| 3 |  |  |  |  |  |  |
| 4 |  |  |  |  |  |  |
| 5 |  |  |  |  |  |  |

**4 Road Safety Engineering Projects and Accident Studies**

You must show how you comply with the **latest DMRB standard “Road Safety Audit”** (or any local standard, for which a copy, in English, must be provided) in Collision Investigation and Prevention and/or Road Safety Engineering experience within the last **24** months.

Applicants should be aware that the information provided must be sufficient for the SoRSA Review Panel to assess their ability as a road safety auditor. **A copy of one of these reports may be requested by the Review Panel.**

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| --- | --- | --- | --- |
| **Scheme Name and Client** | **Date** | **Type of Project\*** | **Summary of work undertaken, no. of collisions and outcomes (min. 100 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.

**5 Continuing Professional Development (CPD) GG 119 Paragraph 3.8.**

Note -A minimum of 2 days (minimum 12 hours) CPD in the field of RSA, collision data analysis or road safety engineering in the last 12 months (a rolling 12 month period).

Certificates (where provided) and a ‘Lessons Learnt’ report on what you learnt and how you have or intend to use this new knowledge in your work must be supplied.

If ‘**self-reading’** is being used it should be structured, listing relevant topics and a ‘Lessons Learnt’ report provided.

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| --- | --- | --- | --- |
| Details of CPD attended within the last 12 months | Days / hours | Date | Organiser |
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**6 DECLARATIONS**

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

The information you provide in this form is required to enable CIHT and SoRSA to communicate with members, and to fulfil the requirements of CIHT’s Charter and Byelaws. CIHT is required by the General Data Protection Regulation (GDPR 2018) and the Data Protection Act (DPA 1998) to ensure that such data is accurate and up to date and you are requested to inform the Institution of any changes. We use the information you provide about yourself to fulfil your requests, queries, updates and orders. We do not share this information with outside parties except to the extent necessary to complete your requests. Full details on how CIHT uses its data are available at **www.ciht.org.uk/privacy**.

**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.

I confirm that I have reviewed CIHT’s membership terms and conditions (available here - https://www.ciht.org.uk/terms-and-conditions/) and privacy statement (available here - https://www.ciht.org.uk/privacy-statement/) that indicates how we use data and store personal details.

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

**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)

**Finally…**.

**If you were asked to undertake a road safety audit today, do you meet the requirements set out in the latest DMRB’ Road Safety Audit’ Standard?**

Have you included: -

1. A completed and signed Annual Review form
2. A copy of your CIHT receipt
3. Copies of certificates (where provided) and a ‘Lessons Learnt’ report on what you learnt and how you have or intend to use this new knowledge in your work must be supplied.

If ‘**self-reading’** is being used it should be structured, listing relevant topics and a ‘Lessons Learnt’ report provided

1. A copy of a Road Safety Audit report **written by you** in the last 24 months which is compliant to the latest DMRB’ Road Safety Audit’ Standard (or your local standard). The report should contain a minimum of 6 different types of problems. A maximum of 2 reports may be supplied to reach this number of problems.

|  |
| --- |
| Your SoRSA Annual Review follows the peer review process as set out in the constitution (<https://www.ciht.org.uk/sorsa/about-sorsa/>) and will be independently reviewed by two members of the SoRSA committee. <https://www.ciht.org.uk/sorsa/committee-regions/committee-members/>  Where there is a difference of opinion between the two independent reviews the Membership Secretary will undertake their own review.  The Chair & Vice-Chair are not included in this process as they remain independent in case of an appeal. |