



College of Applied Biologists / Royal Society of Biology Mutual Recognition Agreement Authorization Form

The following information must be provided in order to apply for Registered Professional Biologist (RPBio) title under the Mutual Recognition Agreement between the College of Applied Biologists (CAB) and the Royal Society of Biology (RSB).

APPLICANT

Name: _____

Address: _____

RSB Membership Number: _____

Level of Education: QAA-FHEQ 6 QAA-FHEQ 7 QAA-FHEQ 8

In order to proceed with this application, the CAB must obtain certain information from the RSB. By submitting this form to the RSB, you confirm that the RSB Registrar may release this information to the Registrar of the CAB.

I hereby give permission for the RSB Registrar to release the information requested by the CAB registrar.

Signed: _____ Date: _____

Applicant: email CAB/RSB MRA Authorization Form to: Royal Society of Biology - cbiol@rsb.org.uk

ROYAL SOCIETY OF BIOLOGY REGISTRAR:

I hereby confirm that: _____ (C.Biol Full Name)

Is a CBiol in good standing with the RSB Yes No

Is not presently the subject of a discipline action/enquiry Yes No

In the event the answer to any of the above questions is No, please provide additional information as appropriate on a separate sheet.

Signed: _____ Date: _____

RSB Registrar

RSB Registrar: please email form to: Registrar, College of Applied Biologists: registrar_office@cab-bc.org