

INDIVIDUAL MEMBERSHIP APPLICATION

PERSONAL INFORMATION

MEMBERSHIP NO.:

FULL NAME:		DATE OF BIRTH:
SEX:	NATIONALITY:	N.R.I.C. NO:
2211	1,211,01,112111,	
ADDRESS:		
		DOCTOODE:
		POSTCODE:
HOME TEL NO:	H/P. NO.:	EMAIL ADDRESS:

YOUR PRESENT JOB

DESIGNATION:]	DATE COMMENCED:		
NAME OF ORGANIS	SATION:			
OFFICE ADDRESS:				
	POSTCODE:	TEL:	FAX:	
PLEASE SUMMARIS paper if necessary)	SE CURRENT DUTIES	S AND RESPONSIBILIT	TIES: (Please use addition	al

YOUR	PREVIO	SIIC	JOR

PLEASE STATE YOUR CAREER IN CHRONOLOGICAL ORDER:

NAME OF ORGANISATION	DESIGNATION	DURATION (YEAR)
		PEGN
		BEGIN
		END
		BEGIN
		END
		BEGIN
		END

ACADEMIC

BA, BSC, MA, MSC, MPil, PhD.	INSTITUTION	YEAR
1.		
2.		
3.		

PROFESSIONAL

INSTITUTION	YEAR JOINED
1.	
2.	
3.	



CERTIFICATION (to be completed by the applicant)

I hereby submit my application for admission to the Institute of Public Relations Malaysia. The entrance fee (nonreturnable) of RM 100, subscription on RM100, two copies of my photograph (passport size), one copy of my IC and one copy of all my academic / professional qualifications are enclosed.

I certify that the statements made in this application are correct, and agree to submit any further evidence, which may be called for in support of this application. If required, I will attend the interview called for by the Membership Committee. I also agreed to abide by the decision of the Council.

Date:	Signature:
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REFERENCE (to be completed on behalf of the applicant)

I vouch for the good character and	d general suitability of the applicant.	
Name:		
Designation:		
	Fax No.:	
Home Tel. No.:		
Date:	a.	

FOR INSTITUTE USE ONLY

Application form, registration Fee (RM 100.00) and Photographs
received on
Application acknowledged on
Submitted to Council on
Type of Member
Applicant informed on
Membership certificate issued on
Status Upgraded on
Life members: Yes / No