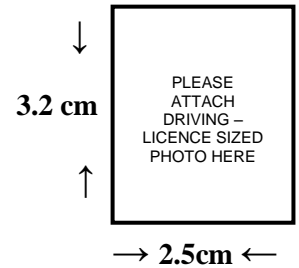


MEMBERSHIP APPLICATION FORM**INSTITUTE OF APPROVED COMPANY SECRETARIES**

[199601015175 (387525-X)]

(A Company Limited By Guarantee – Incorporated In Malaysia)

Suite C-19, 1st Floor, Plaza Pekeliling
 No. 2 Jalan Tun Razak, 50400 Kuala Lumpur
 Tel: 03-40513787/ 03-40510033 Fax: 03-40511133
 E-mail: iacsc19@yahoo.com Website: www.iacs.org.my

**INSTRUCTIONS:**

Please complete the form in **CAPITAL LETTERS** and delete where not applicable. The application will not be accepted if any of the columns is not filled or supporting documents are not attached as required.

CATEGORY OF MEMBERSHIP APPLIED FOR (PLEASE TICK []):

[] ORDINARY[] ASSOCIATE[] GRADUATE[] STUDENT**(A) PERSONAL PARTICULARS**

Full Name (as per NRIC)	
NRIC No.	
Date of Birth	
Gender	
Nationality	
Race	
Residential Address	
Mailing Address	
Telephone No.	House : _____ Office : _____
Handphone No.	
Email	

Company Secretary Licence (Section 20G of the CCMA 2001)	Licence No : _____ Date Issued : _____ Renewal Date: _____
Practising Certificate (Section 241 of the CA 2016)	Practising Certificate No: _____ Date Issued : _____ Renewal Date: _____
Academic qualifications (please attach copies of relevant certified certificates)	
Professional qualifications (please attach copies of relevant certified certificates)	
Membership in other relevant associations (please attach copies of relevant certified certificates)	

(B) COMPANY PARTICULARS

Name (self-employed/employed)	
Company No.	
Address	
Nature of Business	
Designation	
Email	
Telephone No. (O)	
Years of experience in the Company Secretarial Profession (applicable to Associate members)	

DECLARATION

I hereby confirm that the information contained herein is true and correct to the best of my knowledge. If I am accepted as a member of the Institute, I undertake to abide by the provisions of the Constitution, the Code of Ethics, rules, regulations and requirements that are in force and any amendments or changes thereof by the Institute. I will also provide the latest licence and Practising Certificate as it is renewed (applicable for full membership)

Date: _____

Signature: _____

*** The Council reserves the right to approve or reject this application without assigning any reason.**

FEES

I enclose herewith a Cheque/Bank Draft/Money Order No. _____ for RM _____ made payable to 'INSTITUTE OF APPROVED COMPANY SECRETARIES' being registration fee (non-refundable) and annual subscription for the year.

APPLICATION CHECKLIST

Please Tick

1. Application form must be duly completed in **CAPITAL LETTERS** []
2. Copies:
(Certified by any other Company Secretary or Auditors or Commissioner for Oaths)
 - A. Ordinary Members
 - i. Valid Company Secretary Licence (Section 20G of the CCMA 2001) []
 - ii. Practising Certificate (Section 241 of the CA 2016) []
 - B. Associate, Graduate and Student Members []
Other certificates of qualifications or membership in relevant associations/bodies (if available)
3. Two driving licence-size photographs (softcopy is acceptable) []
4. Photocopy of National Registration Identity Card (NRIC) []
5. The registration fee and annual subscription []
6. Cheque/online payment:- []
Institute of Approved Company Secretaries
Malayan Banking Berhad
Bank Account No.: 514075431102

FOR OFFICE USE ONLY

Date application received	
Received by	
Checked by	
Circular Resolution No.	
Date rectified by Council	
Date approved/rejected	
Reasons for rejection	
Membership No.	
Approved membership category	Ordinary/Associate/Graduate/Student

Authorised Signatory:

.....
(Secretary / Membership Chairman)