



APPLICATION FORM

Introduced by

PARTICULARS OF CORPORATE APPLICANT

Name of Organisation _____

Mailing Address _____

Business Registration No. _____ Date/Year of Registration _____

Business Contact No. _____ Fax No. _____ E-mail _____

Please tick (✓) where appropriate

CORPORATE STRUCTURE

Are you a Holding Company with Subsidiaries ☐ Yes ☐ No

(a) The following companies need not supply these details (however, IIA Malaysia reserves the right to request such information if the need arises):

- Public Listed Companies – Main & Second Boards
- Insurance Companies registered under the Insurance Act 1963
- Financial Institution registered under The Banking and Financial Institution Act 1989
- Corporations registered under any Act of Parliament or Special Act

(This section applies if you are part of a Group). Please indicate ☒ Yes or ☐ No in the boxes on the right if the companies are audited by Internal Audit Dept.

List of Holding Companies

1 _____ ☐
2 _____ ☐
3 _____ ☐
4 _____ ☐

List of Subsidiary Companies

1 _____ ☐
2 _____ ☐
3 _____ ☐
4 _____ ☐

Do you provide internal Audit Services to the:

☐ Holding Company

☐ Holding Company plus selected Subsidiary Companies

☐ Holding Company plus all Subsidiary Companies

☐ Individual Company, not part of a Group

NAME OF PERSON(S) UNDERTAKING NOMINATION:

Dr/Mr/Mrs/Ms _____

Designation _____

Contact Number _____

Email _____

Group Department Email _____

Name & Company Stamp

Applicant's Signature

Date

CORPORATE MEMBERSHIP SCHEDULE A

Particulars of Nominees in The Internal Audit Department

No.	Name (Alphabetical Order)	Ranking
1		
2		
3		
4		
5		

Please indicate the nominees' ranking in the department as follows: Manager **M**

No.	Name (Alphabetical Order)	Ranking
6		
7		
8		
9		
10		

Supervisor/Team Leader **S** Team Member **T**

CORPORATE MEMBERSHIP SCHEDULE B

Particulars of Chairman and Members of the Audit Committee

No.	Name (Alphabetical Order)	Ranking
1		
2		
3		
4		
5		

Please indicate members' position in the Audit Committee as follows: Chairman of the Audit Committee **C**

Member of the Audit Committee **M**

No.	Name (Alphabetical Order)	Ranking
6		
7		
8		
9		
10		

CORPORATE MEMBERSHIP SCHEDULE C

Names of Nominated Individual Members

No.	Name (Alphabetical Order)	Ranking
1		
2		
3		

No.	Name (Alphabetical Order)	Ranking
4		
5		

* Individuals who are applying for complimentary membership: (a) need to complete a separate individual membership application form and admission is subject to meeting the admission criteria (b) must be non-members of the Institute at the point of application

CORPORATE MEMBERSHIP FEES & STRUCTURE (please select tier ✓)

Type of Corporate Membership (please tick)	No. of Nominees	No. of Nominated Individual Members	Registration (RM) "One-Off"	Annual Subscription (RM)	Total (RM)
<input type="checkbox"/> Tier 1 (Government Ministry Only)	1 - 9	2	300.00	950.00	1,250.00
<input type="checkbox"/> Tier 1	1 - 9	3	300.00	1,100.00	1,400.00
<input type="checkbox"/> Tier 2	10 - 19	3	300.00	1,725.00	2,025.00
<input type="checkbox"/> Tier 3	20 - 50	4	300.00	2,600.00	2,900.00
<input type="checkbox"/> Tier 4	51 & above	5	300.00	3,565.00	3,865.00

FOR SECRETARIAT USE ONLY

Date Received _____ Membership Application Status ☐ Accepted ☐ Rejected



The Institute of
Internal Auditors
Malaysia

THE INSTITUTE OF INTERNAL AUDITORS MALAYSIA

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