



Introduced by \_\_\_\_\_ IIA Malaysia Membership No.

**PERSONAL DATA**

Name \_\_\_\_\_  Mr.  Mrs.  Ms.  Other \_\_\_\_\_

Date of Birth       Nationality \_\_\_\_\_ IC No. / Passport No \_\_\_\_\_

Home Address \_\_\_\_\_  
\_\_\_\_\_ Postcode \_\_\_\_\_

Home Phone \_\_\_\_\_ Mobile \_\_\_\_\_

Email \_\_\_\_\_ Send Mail to  Home Address  Business Address

**BUSINESS DATA**

Company \_\_\_\_\_ Job Title \_\_\_\_\_

Job Code (See Membership Booklet)

Address \_\_\_\_\_  
\_\_\_\_\_ Postcode \_\_\_\_\_

Business Phone \_\_\_\_\_ ext \_\_\_\_\_ Fax \_\_\_\_\_

Industry Code (See Membership Booklet)

Head of Department's Name \_\_\_\_\_ Designation \_\_\_\_\_

Company Size by number of employees  <50  50-100  >100 Number of Internal auditors (in the company) \_\_\_\_\_

**EXPERIENCE**

Do you spend more than 50% of your time supervising other internal auditors or directing the Audit Programme?  Yes  No

Number of auditing personnel under your supervision \_\_\_\_\_

Number of years as an Internal Auditor \_\_\_\_\_ Number of years in an Internal Audit supervisory position \_\_\_\_\_

**EDUCATION**

College / University \_\_\_\_\_

Highest Qualification \_\_\_\_\_

*(Note: Certified copies of qualifications must be attached with this application)*

Year Obtained \_\_\_\_\_

**COMPANY SECRETARY INFORMATION** *(applicable for Audit Committee Applicants only)*

Name \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_ Email \_\_\_\_\_

Please tick classification applied for  Audit Committee  Professional  Associate

*(Classification is subject to approval of the Professional Services Committee)*

I declare that:

1. All information contained in this application form are true and current
2. If accepted, I agree to abide by the Code of Ethics and Constitution of The Institute of Internal Auditors Malaysia.

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_

# APPLICATION FORM

## FEES

Membership (RM)	Registration Subscription (RM)	Annual (RM)	Total
Audit Committee	100.00	400.00	500.00
Professional	100.00	350.00	450.00
Associate	100.00	330.00	430.00

- Please email the bank-in slip or credit card authorisation form to membership@iiam.com.my with your full name and contact number.
- Please note that the Institute's financial year is 1 January to 31 December.

## FOR SECRETARIAT USE

Date Received \_\_\_\_\_

Recommended class of membership \_\_\_\_\_

IIA Malaysia membership no \_\_\_\_\_

Membership Application Status  Accepted  Rejected

## CHECKLIST FOR APPLICATION

1. Complete the individual Membership application form.
2. Ensure that the following documents are submitted together with:
  - Registration Fee and Annual Subscription (Refer to Fee Structure)
  - A photocopy of your Identity Card / Passport (for non-resident)
  - Certified copies of relevant Degree(s) / Diploma(s) / Certificate(s) (*Documents must be certified as true copies either by a Commission for Oaths or your immediate Superior or Human Resource Department*)
  - A letter with company letterhead from your immediate Superior or Human Resource Department Stating:
    - i) Your Designation - Date & Year of Commencement
    - ii) Your Employment Job function
    - iii) Total no of years of experience in Internal Auditing
3. For Audit Committee Applicants only:  
A confirmation letter from the company secretary states that you are the Audit Committee member of the organisation.