



**The Institute of
Internal Auditors**
Malaysia

THE INSTITUTE OF INTERNAL AUDITORS MALAYSIA

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UPDATE FORM – INDIVIDUAL MEMBERSHIP

SECTION 1: PERSONAL INFORMATION

Name*	
IC Number	
TIN (Tax Identification Number)*	
Gender:	<input type="checkbox"/> Male <input type="checkbox"/> Female
Mailing Address*	
Phone Number*	
Primary Email*	
Send mail to	<input type="checkbox"/> Home Address <input type="checkbox"/> Office Address

SECTION 2: BUSINESS DATA

Company Name	
Company Reg Number	
Job Title:	
Company Address:	
Phone Number*	
Company Email*	
Company Size (by number of employees)*	
Number of Internal Auditors (in the company)*	

Number of years as an Internal Auditor:	
Head of Department/Position	

SECTION 3: EDUCATION INFORMATION

Field of Study	
Academic Level	
University Name	
Year of Completion	
Professional Qualification	

SECTION 4: DECLARATION*

☐ We hereby declare that the information given above is true and correct to the best of our knowledge.

☐ By providing this information, we agree to the processing of personal data in accordance with the PDPA Notice pursuant to the Personal Data Protection Act 2010.

Name: _____

Designation: _____

Signature: _____

Date: _____

Malaysia