

# UPDATE FORM

## PERSONAL INFORMATION

(PLEASE USE CAPITAL)

Membership No :

Full Name :

IC Number : \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Gender :  Male  Female

Home Address : \_\_\_\_\_  
\_\_\_\_\_

Phone Number : \_\_\_\_\_ E-Mail : \_\_\_\_\_

## BUSINESS DATA

Company Name :

Job Title :

Address : \_\_\_\_\_  
\_\_\_\_\_

Phone Number : \_\_\_\_\_ Fax Number : \_\_\_\_\_

## OTHER INFORMATION

Highest Qualification / Professional Qualification : \_\_\_\_\_

Company size by number of employees : \_\_\_\_\_

No. of Internal Auditors (in the company) : \_\_\_\_\_

No. of Years as Internal Auditor : \_\_\_\_\_

Number of years in an internal audit supervisory position : \_\_\_\_\_

Send mail to :  Home Address  Office Address

### More Information :

THE INSITUTE OF THE INTERNAL AUDITORS MALAYSIA  
1-17-07 Menara Bangkok Bank, Berjaya Central Park,  
105 Jalan Ampang, Kuala Lumpur  
Tel: 603-2181 8008 Fax: 603-2181 1717  
Email: renewal@iam.com.my

Signature : \_\_\_\_\_

Date: \_\_\_\_\_