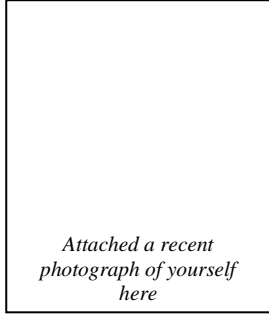




INSTITUTE OF QUALITY MALAYSIA

No 25-2, Plaza Danau 2, Jalan 5/109F,
Taman Danau Desa, 58100 Kuala Lumpur
Tel: 603-79848700 Fax: 603-79848711
Email: contact@iqm.org.my Website: <http://iqm.org.my>



*Attached a recent
photograph of yourself
here*

MEMBERSHIP APPLICATION FORM

1. GRADE OF MEMBERSHIP APPLIED FOR:

STUDENT AFFILIATE ASSOCIATE MEMBER

2. PERSONAL PARTICULARS

Name in full : Title :
(Indicate whether Mr, Ms, Prof, Dr, etc.)

Sex : Male / Female Nationality:

Identity Card Number: Date of Birth:
(Passport number for non-Malaysian)

Company Name / Address: Residential Address:
.....
.....
.....

Position :

Tel :, Fax : Tel :

E-mail :

3. ACADEMIC OR PROFESSIONAL QUALIFICATIONS

No	Qualification	Discipline/Subject	University/Institution	Date of Award
1				
2				
3				
4				
5				

(N.B. Please enclose certified photocopies of your qualifications)

4. MEMBERSHIP OF PROFESSIONAL BODIES & LEARNED SOCIETIES

No	Name of Body	Grade of membership	Date of Admission	Validity period
1				
2				
3				
4				
5				

(N.B. Please enclose certified photocopies of valid Membership certificate)

5. COURSES ATTENDED & EXAMINATIONS PASSED IN QUALITY (INCLUDING THEIR DATES)

No	Dates	Duration of training / course (to the nearest 1/2 day; if less than 1/2 day, specify in hours)	Name of Course / Examination	Result of Examination [Please state "passed" or otherwise] *
1				
2				
3				
4				
5				

(N.B. Please include certified photocopies of Certificates)

6. PROFESSIONAL OR WORK EXPERIENCE IN QUALITY

No	Date/ period	Position held	Organisation	Description	No. of years
1					
2					
3					
4					
5					
Total number of years					

(N./B. Please enclose verified photocopies of testimonials)

7. OTHER RELEVANT INFORMATION AND FULL RESUME

An applicant should provide a resume with information on any activities or achievements which may have a bearing on his caliber and standing as a quality exponent. These include details of any individual personal achievements; any paper, reviews, etc. in quality of which the applicant is author (giving titles and references), details of service on any technical or professional Committees, Panels, etc. an quality; details of other matters which the applicant may consider relevant.

8. DECLARATION

I, the undersigned, declare the foregoing information to be true to the best of my knowledge.

Sign :

Date :

Name in full :

Please return to :
 Honorary Secretary
 Institute of Quality Malaysia (IQM)
 No 25-2, Plaza Danau 2, Jalan 5/109F,
 Taman Danau Desa, 58100 Kuala Lumpur
 Tel: +60-3-79848700 Fax: +60-3-79848711
 E-mail : contact@iqm.org.my
 Website: <http://iqm.org.my>

<p>For office use only Date received: Cheque/Online Transfer: Grade of Membership approved: Membership No.: Date Applicant informed:</p>
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