



PERTUBUHAN JURUUKUR DIRAJA MALAYSIA

Royal Institution of Surveyors Malaysia

No. 64&66, 3rd Floor, Bangunan Juruukur, Jalan 52/4, 46200 Petaling Jaya, Selangor

Tel: 03 - 79551773/79569728/79548358

Fax: 03-7955 0253

Website : www.rism.org.my

Email: admin@rism.org.my

APPLICATION FOR ENROLMENT AN ASSOCIATE MEMBER

Divisions:

Geomatics & Land Surveying / Quantity Surveying / Property Surveying / Building Surveying

Full Name
(As per NRIC/Passport)

:

Other Names

:

Gender: M / F

Date & Place of Birth

:

Nationality Status

:

Identity Card New (NRIC)

:

Passport No.

:

Correspondence Address

:

Office No

:

Postcode :

Mobile No

:

Fax No :

Email

:

Please affix your

photograph here. An
additional photograph
is to be enclosed with
this
application

AM

FOR OFFICE USE ONLY

Date Received

:

Date Referred To Divisional
Committee

:

Date Recommended

:

Date of Admission

:

Date Of Notification

:

Membership No

:

Signature of Secretary

:

Date

:

To: Honorary Secretary General
Royal Institution of Surveyors Malaysia

I, _____

(NAME IN BLOCK LETTERS)

hereby apply to be a Probationer member of Royal Institution of Surveyors Malaysia and declare as follow:

A. QUALIFICATION

a. Sijil Pelajaran Malaysia / Malaysian Certificate of Examination

b. Year of Passing : _____

c. Sijil Tinggi Persekolahan Malaysian / Higher School Certificate

d. Year of Passing: _____

e. Any other Equivalent Qualification : _____

f. Year of Passing : _____

B. PARTICULAR OF STUDIES

(To be completed where the candidate is undergoing a course of study)

- a) I am admitted to _____
-University / college / Institute*
- b) I am taking up a course in : _____ Fulltime / Part Time*
- c) I expect to obtain a degree / diploma in : _____
- d) Duration of the Course is : _____ year
- e) I am now in: _____ year of the course.

C. EMPLOYMENT DETAILS

(To be completed where the candidate is employed)

- a) I am employed in the capacity of: _____

- b) I am engaged on the following duties: _____

- c) Name of Firm / Company: _____
- d) Address _____

- Office Tel No : _____ Fax No : _____
- E-mail : _____

** Delete where appropriate*

Note : Applications should submit certified photostate copies of Passport / IC, testimonials certificates and other relevant documents in support of the application.

I certify that the above particulars are correct.

Signature: _____

Date : _____

D. PROPOSER

I, the undersigned being a Fellow / Member of RISM do, from my personal knowledge of the above applicant, propose that the applicant to be admitted as a Graduate member of The Institution.

Name : _____
(IN BLOCK LETTERS)

Address: _____

Contact No. : _____

Email : _____

Signature : _____

Date : _____

* Delete where appropriate