

To: The Institute of Internal Auditors Malaysia
1-17-07, Menara Bangkok Bank
Berjaya Central Park
105, Jalan Ampang
50450 KUALA LUMPUR

APPLICATION FOR UPGRADING TO PROFESSIONAL MEMBERSHIP

Name : _____ Membership No. : _____

Address: _____

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

Please tick where appropriate:

- I) I hold a Professional Qualification of _____
with _____ years of internal auditing experience. I would like to be upgraded to Professional
Membership upon completing the required 3 years of internal auditing working experience. *(Please
refer to the Upgrading requirements)*
- II) I have been an Associate Member of IIA Malaysia for 10 or more years by 31 May 2002.
I would like to be upgraded to Professional Membership.

N/B: Kindly complete this form and return to the Institute together with the following :

- Payment of RM371* being upgrading processing fee of RM53* and Professional Membership fee of RM318*.
- A company letter to certify that you have fulfilled 3 years working experience in Internal Auditing.
(applicable to I).
- Certified copy of professional qualification (i.e. CIA, CCSA, CFSA, CGAP, ACCA, CPA, CIMA,
ICSA, CISA. Please contact Membership Department at membership@iiam.com.my to check on the
other professional qualification.
- Members who have remitted their 2016 Annual Subscription, need only to pay for RM74.20* which is
the difference between annual subscription for Professional Member and upgrading processing fee.

Note : Fee is inclusive of GST (6%)

Payment (please tick) :

- Cash
 Cheque
 Credit Card (please complete the attached Credit Card authorisation form)
 Direct bank-in (Malayan Banking Berhad, account no. **5144 0450 1825**)
➤ All cheques should be crossed A/C Payee only and made payable to **The Institute of
Internal Auditors Malaysia**
➤ Please fax the bank-in slip or credit card authorisation form to 603 2181 1717 with your name
and telephone number

DECLARATION BY APPLICANT

I hereby apply for Professional Membership and the granting of the Chartered Members of The Institute of
Internal Auditors Malaysia designation (CMIIA) and declare that:

If granted the CMIIA designation, I agree to:

1. Abide by the Constitution of The Institute of Internal Auditors Malaysia, the Code of Ethics and the
International Standards for the Professional Practice of Internal Auditing by Global IIA, USA.
2. Stop using the designation on ceasing to be a member of the Institute.

(Signature)

(Date)

FOR OFFICE USE ONLY

Processing Fee (RM) : _____ Receipt No. : _____

Approved by : _____ Date : _____
(Chairman, Professional Services Committee)