



PERTUBUHAN JURUUKUR MALAYSIA

The Institution of Surveyors, Malaysia

3rd Floor, Bangunan Juruukur, 64-66, Jalan 52/4, 46200 Petaling Jaya, Selangor
 Tel: 03 - 79551773/79569728/79548358 Fax: 03-7955 0253
 Website : www.ism.org.my Email: secretariat@ism.org.my

APPLICATION FOR ENROLMENT AS A GRADUATE

Divisions:

Geomatic & Land Surveying / Quantity Surveying / Property Consultancy & Valuation Surveying / Building Surveying

Full Name : _____
 Other Names : _____ Gender: _____
 Date & Place of Birth : _____
 Nationality Status : _____
 Identity Card New : _____ Old : _____
 Passport No : _____
 Regular Business Address : _____

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



Office No : _____ Postcode : _____
 Mobile No : _____ Fax No : _____
 Email : _____
 House Address : _____

Tel No : _____

To: Secretary General
 The Institution of Surveyors Malaysia

I, _____

(NAME IN BLOCK LETTERS)

hereby apply to be a Graduate member of The Institution of Surveyors Malaysia and declare as follow:

A. QUALIFICATION

1. ACADEMIC QUALIFICATION

- Degree : _____
- University / College / Institute: _____
- Year of Graduation : _____
- Diploma : _____
- University / College / Institute: _____
- Year of Graduation : _____

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:	_____

B. PROFESSIONAL QUALIFICATIONS AND TRAINING

a) i. Other Professional Qualifications: _____

ii. Practical Experiences: _____

b) Year of Passing ISM Professional Examination (Final / Direct Final) : _____

OR

c) Any Other Equivalent Examination: _____

C. EMPLOYMENT DECLARATION

The declaration on this page must be signed by the Principal or Partner in the candidate's firm. Where the candidate is employed in the public service in a branch office of by a large undertaking, the signature of the head, or his / her authorized deputy, of the technical department in which the candidate is engaged must b obtained.

a) The candidate is employed in the capacity of: _____

b) The candidate is engaged on the following duties: _____

c) Name and qualifications of the person directly responsible for the candidates' training

d) Signature of Principal or Head of Department with qualifications, degrees, etc.

Name of Employer in BLOCK LETTERS: _____

D. PROPOSER

I, the undersigned being a Fellow / Member of ISM 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: _____

Signature : _____

Date : _____

E. APPLICANT'S DECLARATION

I certify that the above particulars are correct.

Signature : _____

Date : _____

Note : Certified photostate copies of IC, testimonials, certificates and other relevant documents in support of the application must be submitted

* Delete_where appropriate