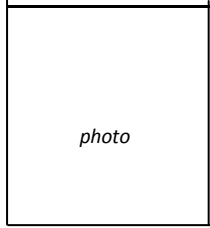




**INSTITUT PENGURUS HARTA DAN FASILITI MALAYSIA  
MALAYSIAN INSTITUTE OF PROPERTY AND FACILITY MANAGERS (MIPFM)**

(1682-11-SEL)

Plaza 138, 7-4,  
Jalan Ampang, 50450, Kuala Lumpur  
Tel : 03-7960 1261 / 019-600 8022  
Email: secretariat@mipfm.org.my  
Website : www.mipfm.org.my



**APPLICATION FORM TO UPGRADE TO FELLOW**

|  |   |   |            |             |  |
|--|---|---|------------|-------------|--|
| NAME (as in NRIC)  |   |   |            |             |  |
| NRIC No.   |   |   |            |             |  |
| DATE OF BIRTH<br>(Must be 35 years and above)                                  | Date  | Month                                       | Year       | NATIONALITY |  |
|  |   |   |            |             |  |
| GENDER (please tick)   | <input type="checkbox"/> Male <input type="checkbox"/> Female |   | MOBILE NO. |             |  |
| NAME OF COMPANY/<br>FIRM   |   |   |            |             |  |
| ADDRESS OF<br>COMPANY/ FIRM  |   |   |            |             |  |
| DESIGNATION  |   | <input type="checkbox"/> Name Card Attached |            |             |  |
| TELEPHONE NO.  |   | FAX NO.                                     |            |             |  |
| EMAIL ADDRESS  |   |   |            |             |  |
| RESIDENTIAL ADDRESS  |   |   |            |             |  |
| ACADEMIC QUALIFICATIONS  |   |   |            |             |  |
| PROFESSIONAL QUALIFICATIONS  |   |   |            |             |  |
| REGISTRATION WITH BOARD OF<br>VALUERS , APPRAISERS & ESTATE<br>AGENTS MALAYSIA |   |   |            |             |  |
| OTHER AFFILIATIONS/<br>ASSOCIATIONS  |   |   |            |             |  |
|  |   |   |            |             |  |

RECORD OF SERVICE TO THE COMMITTEE

i. Please state your service and achievements in MIPFM Committee

| No. | Year / Term | Designation / Role | Achievements |
|-----|-------------|--------------------|--------------|
|     |             |                    |              |

ii.SERVICE TO THE PROFESSION

Please state your professional experience and your contribution in uplifting the property and facility management profession.

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APPLICANT'S DECLARATION:

I ..... hereby declare that the details furnished above are true and correct to the best of my knowledge and belief and I undertake to inform you of any changes therein, immediately. In case any of the above information is found to be false or untrue or misleading or misrepresenting, I am aware that I may be held responsible for it.

|           |  |              |  |
|-----------|--|--------------|--|
| SIGNATURE |  | DATE APPLIED |  |
|-----------|--|--------------|--|

|                        |             |                        |             |
|------------------------|-------------|------------------------|-------------|
| <b>PROPOSER</b>        | (signature) | <b>SECONDER</b>        | (signature) |
| NAME                   |             | NAME                   |             |
| MIPFM'S MEMBERSHIP NO. |             | MIPFM'S MEMBERSHIP NO. |             |

APPLICATION APPROVED     APPLICATION NOT APPROVED

Committee Meeting Date: .....

Secretary General Sign-off: .....