

INSTITUT PENGURUSAN SUMBER MANUSIA MALAYSIA

Malaysian Institute of Human Resource Management APPLICATION FORM FOR MODULAR CERTIFIED PROGRAMMES

(Complete this form in BLOCK LETTERS)

		(complete in	ing rollin in become ber rend)			
		1. PERSONAL PARTICULARS				
		FULL NAME (AS NRIC):				
	Affix Passport	NRIC NO:	DAT	E OF BIRTH:		
	Sized Photo	MARITAL STATUS: MARRIED	SEX:	:		
		INTAKE:	•			
		LOCATION:				
PROG	GRAMME APPLIED FOR:	RESIDENTIAL ADDRESS:				
□ Ce	ertification In Buss.					
H	Strategy odule 1					
	rtification in HR Metrics,	MOBILE PHONE NO:	TEL1	NO:		
Planning & Talent Acquisition		OFFICE ADDRESS:				
Me	odule 2					
Dev	tification in Building & reloping Talents					
Module 3 Certification In Compensation & Rewards Module 4			TEL	NO:		
			FAX	NO:		
		E-MAIL:				
	tification In Employee Relations dule 5	oyee Relations CORRESPONDENCE ADDRESS: Residential / Office*				
Cer	tification in Safety, Health &					
Social Security Module 6						
		2. CURRENT APPOINTMENT				
OFFICE USE ONLY		DESIGNATION:	DAT	E APPOINTED:		
		POSITION / RANK:				
APPRO	VED	DEPARTMENT / SECTION:				
OPTION:		NAME OF COMPANY:				
		NATURE OF BUSINESS:				
		Describe briefly your main duties:				
DATE:				_		
VERIFIED BY: MANAGER						

3. ACADEMIC BACKGROUND (Enclose of relevant documents the highest degree / diploma / certificate attained)						
SCHOOL, COLLEGES, UNIVERSITY	YEAR OF STUDIES	QUALIFICATION				
4. CAREER HISTORY (Recent 2 positions)						
EMPLOYER'S NAME & ADDRESS	POSITION HELD	DATE JOINED & LEFT				
1)						
2)						
5. PAYMENT (Company / Self Sponsored)						
NAME OF COMPANY:						
CONTACT PERSON:						
TELEPHONE NO:	FAX NO:					
SELF SPONSORED APPLICANT:	MIHRM MEMBERSHIP NO (IF ANY):					
MODE OF PAYMENT:						
(Please tick)	(Please tick)					
Modular Fee of RM 1950.00 per module : Cash or Cheque						
(Payable to "The Malaysian Institute of Human Resource Management" CIMB BANK BERHAD- 8002324212) Copy of bank in slip to be attached for						
receipt						
6. REFERENCE						
NAME		TELEPHONE				
1)						
2)						
7. DECLARATION						
.1 I declare that all particulars and information supplied in connection with this Application are true and correct to the best of						
my knowledge and belief. If any of the above to be untrue, I agree that MIHRM reserves the right to act accordingly.						
.2 I hereby authorize MIHRM to make reference checks to use information in this Application for whatever purpose as may be						
necessary in furtherance to the objective of MIHRM.						
NOTE: Please return this form to MIHRM with a crossed cheque / money order or cash RM being the Registration Fee made payable to MALAYSIAN INSTITUTE OF HUMAN RESOURCE MANAGEMENT (MIHRM).						
made payable to which the month of the MANA MESOCIACE MANAGEMENT (MILITAY).						
Signature:	Date:					