

## ACTION 2

### FMII Enrolment Application Form



THE MALAYSIAN  
INSURANCE INSTITUTE

1. Use Block Capital throughout in completing this form.
2. Please ensure that you read and understand the FMII handbook before completing this section.
3. Please complete all fields - it is essential we have your email address as this is our main channel of contact with you.

| Section A                            |   | Personal Details |  |  |  |  |   |  |  |   |            |  |  |  |  |  |
|--------------------------------------|---|------------------|--|--|--|--|---|--|--|---|------------|--|--|--|--|--|
| Name (as in IC)                      |   |                  |  |  |  |  |   |  |  |   |            |  |  |  |  |  |
| Membership ID                        |   |                  |  |  |  |  |   |  |  |   |            |  |  |  |  |  |
| New I.C. no.                         |   |                  |  |  |  |  | - |  |  | - |            |  |  |  |  |  |
| Old I.C.no.                          |   |                  |  |  |  |  |   |  |  |   |            |  |  |  |  |  |
| Passport no.                         |   |                  |  |  |  |  |   |  |  |   |            |  |  |  |  |  |
| Correspondence address               |   |                  |  |  |  |  |   |  |  |   |            |  |  |  |  |  |
|                                      |   |                  |  |  |  |  |   |  |  |   |            |  |  |  |  |  |
|                                      |   |                  |  |  |  |  |   |  |  |   |            |  |  |  |  |  |
|                                      |   |                  |  |  |  |  |   |  |  |   | Postcode   |  |  |  |  |  |
| Tel. No.                             |   |                  |  |  |  |  |   |  |  |   | Mobile no. |  |  |  |  |  |
| Company name                         |   |                  |  |  |  |  |   |  |  |   |            |  |  |  |  |  |
| Office address                       |   |                  |  |  |  |  |   |  |  |   |            |  |  |  |  |  |
|                                      |   |                  |  |  |  |  |   |  |  |   |            |  |  |  |  |  |
|                                      |   |                  |  |  |  |  |   |  |  |   |            |  |  |  |  |  |
| Office tel.no.                       |   |                  |  |  |  |  |   |  |  |   | Postcode   |  |  |  |  |  |
| Email<br><small>(compulsory)</small> | <i>* Please take note when providing your email address as most correspondence with be sent electronically.</i> |                  |  |  |  |  |   |  |  |   |            |  |  |  |  |  |

| Section B |  | Fellowship Plan |  |  |  |  |  |  |  |  |  |  |  |
|-----------|--|-----------------|--|--|--|--|--|--|--|--|--|--|--|
|-----------|--|-----------------|--|--|--|--|--|--|--|--|--|--|--|

Please refer to the Fellowship regulations and guidelines when completing your plan. Please complete this form and keep a copy for your reference.

| Objectives set to reach Fellowship                                 | Target | Actual |
|--|--------|--------|
| Date enrolled on Fellowship scheme                                 |        |        |
| Intended date of submission of EIB for assessment                  |        |        |
| Intended date of completion of Major Accomplishments               |        |        |
| Intended date of completion of testimony of individual advancement |        |        |
| Intended date of application for election to Fellowship            |        |        |

State how you have tried to ensure that your personal objectives in reaching Fellowship also meet with those of your employer :

|  |
|--|
|  |
|  |
|  |
|  |
|  |
|  |

**Section C**

**Major Accomplishments chosen to support election to Fellowship**

Please indicate which of the following options you intend to put forward as your Major Accomplishments.

|                                       |                                   |  |  |
|---------------------------------------|-----------------------------------|--|--|
| <input type="checkbox"/> Major Essay* | <input type="checkbox"/> Project* | <input type="checkbox"/> Published work* | <input type="checkbox"/> Qualification |
|---------------------------------------|-----------------------------------|--|--|

If you intend to submit an alternative qualification as your Major Accomplishments, please attach a completed copy of the Major Accomplishments application form and supporting documentation with this plan. This application form can be found on the MII website [www.insurance.com.my](http://www.insurance.com.my)

*\* If you intend to submit a dissertation, project or portfolio of published work as your Major Accomplishments, please complete the following:*

|                                     |  |
|-------------------------------------|--|
| <b>Title</b>                        |  |
| <b>Brief description of content</b> |  |

**Please note:**

- That if your submission contains any company-specific information you should obtain an endorsement of your intended Major Accomplishments from your employer.
- In submitting your Major Accomplishments you are agreeing, where this is successfully accepted towards Fellowship, for the CII to make this available for public view.

|        |      |
|--------|------|
| Signed | Date |
|--------|------|

**Section D**

**Fee and Method of payment**

|                       |          |
|-----------------------|----------|
| Enrolment fee and BEP | RM 3,500 |
|-----------------------|----------|

I am enclosing payment of RM \_\_\_\_\_ being processing fee for exemption application. *Please tick (✓)*

|  |   |  |  |                                      |  |  |                               |  |  |                                 |  |  |
|--|---|--|--|--------------------------------------|--|--|-------------------------------|--|--|---------------------------------|--|--|
| Cash   | For walk-in at MII Damansara Heights or MII City Centre counter only.   |  |  |                                      |  |  |                               |  |  |                                 |  |  |
| Interbank GIRO   | Bank in to MII's RHB Ac no : 2 - 64160 - 00004670.<br><i>Please email the copy of payment slip to us.</i>               |  |  |                                      |  |  |                               |  |  |                                 |  |  |
| Bank draft   | Payable to "THE MALAYSIAN INSURANCE INSTITUTE".<br><i>Please write your name and IC at the back of your Bank Draft.</i> |  |  |                                      |  |  |                               |  |  |                                 |  |  |
| Debit/credit card  | Please debit my account with the total exemption fee imposed.   |  |  |                                      |  |  |                               |  |  |                                 |  |  |
| Type of card <i>(please tick ✓)</i>  | <input type="checkbox"/> VISA   |  |  | <input type="checkbox"/> MASTER CARD |  |  | <input type="checkbox"/> AMEX |  |  | <input type="checkbox"/> OTHERS |  |  |
| Valid from   |   |  |  |                                      |  |  | Expiry date                   |  |  |                                 |  |  |
| Card number  |   |  |  |                                      |  |  |                               |  |  |                                 |  |  |
| Cardholder's name & address<br><i>(if different from personal details)</i> |   |  |  |                                      |  |  |                               |  |  |                                 |  |  |
|  |   |  |  |                                      |  |  |                               |  |  |                                 |  |  |
|  |   |  |  |                                      |  |  |                               |  |  |                                 |  |  |
| Cardholder's signature   |   |  |  |                                      |  |  | Date                          |  |  |                                 |  |  |

**Applicant's Declaration.**

1. I am deemed to have consented to MII to use, store, disclose and process my personal data for the Purpose mentioned above and agree to comply with and be subject to the jurisdiction of all rules and regulation of MII concerning the fellowship application.
2. I am submitting this Major Accomplishments as part of my application for Fellowship. I confirm that my submission is my own work as detailed in the Fellowship regulations and guidelines.

**Plagiarism.**

In submitting work under the Fellowship programme, I am declaring that I have read the Fellowship guidelines and that it is my own work. I acknowledge that failure to comply with these rules may result in disciplinary action.

|        |      |
|--------|------|
| Signed | Date |
|--------|------|