

### STUDENT REGISTRATION FORM

Please return completed form to:

Unit B-13-2,Block B, 13<sup>th</sup> Floor,Megan Avenue II,Jalan Yap Kwan Seng,50450,Kuala Lumpur

Tel: [+603-2162 8989](tel:+603-2162-8989) Fax: +603-2162 8990

Email: [examination@ctim.org.my](mailto:examination@ctim.org.my) or [secretariat@ctim.org.my](mailto:secretariat@ctim.org.my)

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Closing date for application is on or before 1<sup>st</sup> September every year.

Please read the enclosed Student Guide for reference.

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#### PERSONAL DETAILS

NAME (MR/MISS/MS): \_\_\_\_\_  
(as state in IC/Passport) (Please enclose certified true copy of IC/ Passport)

IDENTITY CARD /PASSPORT NO : \_\_\_\_\_

DATE OF BIRTH : \_\_\_\_\_

GENDER : \_\_\_\_\_

RACE : \_\_\_\_\_

NATIONALITY : \_\_\_\_\_

HOME TEL NO : \_\_\_\_\_

HANDPHONE NO : \_\_\_\_\_

E - MAIL CONTACT : \_\_\_\_\_

PREFERRED MAILING ADDRESS  HOME  OFFICE

HOME ADDRESS : \_\_\_\_\_

COMPANY NAME : \_\_\_\_\_

COMPANY ADDRESS : \_\_\_\_\_

INDUSTRY : \_\_\_\_\_

DESIGNATION : \_\_\_\_\_

COMPANY TEL NO : \_\_\_\_\_

COMPANY FAX NO : \_\_\_\_\_

PRINCIPAL ACTIVITY:

TAXATION  FINANCIAL MANAGEMENT  GENERAL MANAGEMENT

AUDITING  MANAGEMENT ACCOUNTING  FINANCIAL ACCOUNTING

COMPANY SECRETARIAL  OTHER: \_\_\_\_\_

#### PREVIOUS REGISTRATION

HAVE YOU REGISTERED WITH THE INSTITUTE BEFORE? (PLEASE TICK ACCORDINGLY)

YES  NO

IF YES, PLEASE COMPLETE THE FOLLOWING ENTRY - REGISTRATION DATE: \_\_\_\_\_

TERMINATION DATE: \_\_\_\_\_ REGISTRATION NO.: \_\_\_\_\_

**EDUCATION QUALIFICATIONS** (Please enclose certified true copy of Academic Transcripts and Certificates)

	Date Completed	Certificate / Diploma / Degree Awarded
SPM / EQUIVALENT	: _____	_____
STPM / EQUIVALENT	: _____	_____
ACADEMIC/TERTIARY EDUCATION	: _____	_____
PROFESSIONAL QUALIFICATION	: _____	_____

**To the Council  
CHARTERED TAX INSTITUTE OF MALAYSIA**

I hereby certify that the above information is correct and agree to abide by the articles and rules and regulations of the Institute when I am accepted as a student.

I enclose herewith the necessary fees payable

Date: \_\_\_\_\_ Signature: \_\_\_\_\_

**CHECKLIST**

Please complete this form correctly and enclose all the required documents, if applicable, together with the correct fees and photos. Your application will be returned to you for amendment and you may not be accepted in time to sit at the next examination session.

Please ensure that you have read all the instructions carefully and are aware of the closing dates and fees.

PLEASE **DO NOT** ENCLOSE THE ORIGINAL DOCUMENTS.

- Certified true copy of Identity Card
- Certified copy of Academic Transcripts and Certificates in support for your application
- Two passport sized photographs
- Cheque/Money Order/Postal Order /Bank Draft for registration of RM 360.00  
(Registration fee : RM180.00 and Annual Subscription fee : RM 180.00) payable to  
“CHARTERED TAX INSTITUTE OF MALAYSIA”

**For Office Use**

Date of application received: \_\_\_\_\_,

Date of application approved: \_\_\_\_\_,

Approved by: \_\_\_\_\_,

Registration Date: \_\_\_\_\_,

Registration No.: \_\_\_\_\_,