



CHARTERED TAX INSTITUTE OF MALAYSIA

NOMINATION FORM  
FOR ELECTION OF COUNCIL MEMBER

PROPOSER

I \_\_\_\_\_ Membership No. \_\_\_\_\_,  
being a Fellow/Associate\* member of the Chartered Tax Institute of Malaysia in good standing and  
eligible to vote hereby propose and nominate \_\_\_\_\_  
Membership No. \_\_\_\_\_ to serve on the Council for the term 2018/2019.

\_\_\_\_\_  
Signature of Proposer

Dated this \_\_\_\_\_ day of \_\_\_\_\_, 2018.

SECONDER

I \_\_\_\_\_ Membership No. \_\_\_\_\_,  
being a Fellow/Associate\* member of the Chartered Tax Institute of Malaysia in good standing and  
eligible to vote, second the above nomination.

\_\_\_\_\_  
Signature of Secunder

Dated this \_\_\_\_\_ day of \_\_\_\_\_, 2018.

NOMINATED CANDIDATE

I \_\_\_\_\_ Membership No. \_\_\_\_\_,  
being a Fellow/Associate\* member of the Chartered Tax Institute of Malaysia in good standing do  
accept the nomination to stand for election for the 2018/2019 term.

\_\_\_\_\_  
Signature of Candidate

Dated this \_\_\_\_\_ day of \_\_\_\_\_, 2018.

*\* Strike out whichever is not desired*

Completed nomination forms should be deposited with the office of the Institute together with CV and latest photograph on or before **5.00 p.m. Friday, 20 April 2018.**

*(Each form is to be used for one nomination only. Additional nomination forms may be obtained from the Institute or may be downloaded from the Institute's Website under 'Members Only' and only nomination forms with **original signatures** will be accepted)*



**PARTICULARS OF MEMBER PROPOSED FOR ELECTION TO THE COUNCIL OF THE  
CHARTERED TAX INSTITUTE OF MALAYSIA**

1. Name of Candidate : \_\_\_\_\_

2. Membership No. : \_\_\_\_\_

3. Present Position : \_\_\_\_\_

Organisation Name : \_\_\_\_\_

Organisation Address : \_\_\_\_\_

\_\_\_\_\_

Mobile No.: \_\_\_\_\_ Tel No.: \_\_\_\_\_ Fax No.: \_\_\_\_\_

Email: \_\_\_\_\_

**NOTES:**

1. This form is to be completed by the member proposed for election to the Council of the Institute and deposited with the office of the Institute.
2. Please refer to the completion checklist below and ensure that all documents requested are submitted together with the nomination form.

**COMPLETION CHECKLIST**

- |                                    |                          |
|------------------------------------|--------------------------|
| 1. All details completed           | <input type="checkbox"/> |
| 2. Original signatures only        | <input type="checkbox"/> |
| 3. Curriculum vitae attached       | <input type="checkbox"/> |
| 4. Photograph attached or inserted | <input type="checkbox"/> |

*The curriculum vitae attached will be used for circulation to members together with the Annual Report.*