

## 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:+603-21628989) Fax: +603-2162 8990

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

Closing date for application is on or before 1<sup>st</sup> September every year.  
Please read the enclosed Student Guide for reference.

### PERSONAL DETAILS

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

DATE & PLACE OF BIRTH: \_\_\_\_\_ NATIONALITY: \_\_\_\_\_

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

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

TEL NO: \_\_\_\_\_ H/P: \_\_\_\_\_ E – MAIL: \_\_\_\_\_

NAME AND ADDRESS OF EMPLOYER: \_\_\_\_\_

TEL NO.: \_\_\_\_\_ FAX NO.: \_\_\_\_\_

PREFERRED MAILING ADDRESS: ☐ HOME ☐ OFFICE

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

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

### 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.: \_\_\_\_\_

## WORKING EXPERIENCE

Name of Employer	Nature of Business	Date Employed		Nature / Duties / Responsibilities	Designation / Post
		From	To		

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 (*Note 4*)

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 300.00  
(*Registration fee : RM150.00 and Annual Subscription fee : RM 150.00*) payable to  
“**CHARTERED TAX INSTITUTE OF MALAYSIA**”

### For Office Use

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

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

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

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

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