



PAM

**PERTUBUHAN AKITEK MALAYSIA
MALAYSIAN INSTITUTE OF ARCHITECTS**

Northern x Sabah x Sarawak x Southern Chapter

**APPLICATION FOR MEMBERSHIP OF INTERN
ARCHITECTS**

**Please affix a
photograph
here and also
enclose an
additional
photograph**

Full Name.....

Other Names Sex

Date and Place of birth.....

Citizenship Status

Identity Card / Passport No

Place & Date of Issue

Regular Business Address

.....

.....

Tel. No Fax No

Postal Address (if different from above).....

.....

.....

Mobile: Email:

A. Architectural/ Professional Qualification

1. Academic Qualifications:

a) SPM/STPM

b) Year Passed

c) Degree/Diploma.....

d) Year of Study..... To

e) University/College/Institute

.....

f) Year/Month of graduation.....

B. Employment

a. I am presently employed with

from (Date)

C. Payment

Payment of RM50 as your annual contribution to the Chapter.

Date: Signature:

FOR OFFICE USE ONLY

Date received

Receipt No

Amount

Date referred to Chapter
Committee.....

Date approved.....

Signature of Secretary

.....
Date: