

PERSONAL INFORMATION

Title			NRIC No./Passport No.		
Surname	Other names				
Address (H)					
				Postal code	
Nationality	Date of birth		Age	Sex	
Race	Marital status		Mobile No		
Office tel	Home tel		Email		

Affix recent photo

EDUCATION

[Please enclose copies of your certificates]

Year graduated	Name of institution/university	Qualification obtained

TRAINING IN CAREER COUNSELLING

Year attended	Name of workshop/seminar/course	Duration of course	Course hours	Remarks

EMPLOYMENT

[Present and immediate past two places of work]

Date joined	Date left	Name of organisation	Position held

WORK EXPERIENCES RELATED TO CAREER DEVELOPMENT

Year from: _____ Year to: _____

Description: _____

Description: _____

CURRENT PROFESSIONAL INVOLVEMENT

Year from	Year to	Name of organisation	Position held

CATEGORY OF MEMBERSHIP APPLIED FOR: (Entrance fee: \$50)

- Fellow (Annual subs: \$80.00)
- Professional Member (Annual subs: \$80.00)
- Associate Member (Annual subs: \$50.00)
- Student Member (Annual subs: \$30.00)

Applicant's signature

Date

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FOR APPLICATION TO FELLOW ONLY

The above application to Fellow is nominated by 3 Professional Members:

Name: _____ Name: _____ Name: _____

Signature/Date

Signature/Date

Signature/Date

FOR OFFICE USE

APPROVED BY: / DATE

Database / Address book created:

Acc. No.