

Human Factors and Ergonomics Society Malaysia Corporate Membership Application Form

Instructions for Corporate Membership Application

1. Please print or type legibly. All applications are subject to conform to the eligibility criteria as attached in the Appendix. Membership may be rejected if applicant fails to meet the criteria. In this situation, applicants are encouraged to appeal.
2. Kindly provide the necessary supporting documents as requested in the form.
3. For immediate processing, sign, scan and email a softcopy of completed form with supporting documents to: secretary@hfem.org and nsabrina.mn@gmail.com. Typical timeframe to consider a new application is **TWO months**.

Section A: Applicants Information

1. Name of Business Organization:

2. Company Registration No.:

3. Type of Business:

4. Nature of Business:

5. Business Address:

6. Telephone no.: a) Office:

b) Fax:

7. Email Address:

8. Total No. of Employees:

Mailing address (to which all official correspondence should be sent to)

a) Name:

b) Designation:

c) Address:

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Section B: Representation

PRINCIPLE REPRESENTATIVE (CEO/MD or person who holds a position of responsibility in the organization)

Name:

NRIC No./Passport No.

Male/Female

Telephone number: a) Office No.:

b) Fax No.:

Email Address:

REPRESENTATIVE 1 (Authorized employee who implement HFE at workplace)

1. Name:

2. NRIC No./Passport No.

Male/Female

3. Telephone number: a) Office No.:

b) Fax No.:

4. Email Address:

Academic and Professional Qualification (State the highest qualification achieved)

Qualification	Discipline/Specialization	Institution	Year Awarded

REPRESENTATIVE 2 (Authorized employee who implement HFE at workplace)

5. Name:

6. NRIC No./Passport No.

Male/Female

7. Telephone number: a) Office No.:

b) Fax No.:

8. Email Address:

Academic and Professional Qualification (State the highest qualification achieved)

Qualification	Discipline/Specialization	Institution	Year Awarded

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Section C: Fees

Entrance Fees (MYR)	500.00
Annual fees (MYR) for date application approved as follow:	
Annual fees	2,000.00
3 years	5,000.00

TOTAL AMOUNT PAYABLE: RM _____
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Tick '√' a Payment Method:

- | | |
|--|--|
| <input type="checkbox"/> CHEQUE
crossed and made payable to Human Factors and Ergonomics Society Malaysia | <input type="checkbox"/> INTERBANK TRANSFER OR DIRECT DEPOSIT
to Human Factors and Ergonomics Society (M)
Bank Account at MAYBANK, KL Sentral Branch,
No. 564717004441 |
|--|--|

Notes:

1. The above fees shall be paid within **60 days** of the membership being approved by the Executive Board or Treasurer written notice requesting the same.
2. Payment in **Ringgit Malaysia (RM)** only.
3. Email a copy of the transaction details to hfemsecretary@gmail.com.
4. Remember to keep a copy of the application form for your reference.

SIGNATURE OF PRINCIPLE REPRESENTATIVE

NAME:
DATE:

SIGNATURE (ALTERNATIVE REPRESENTATIVE 1)

NAME:
DATE:

SIGNATURE (ALTERNATIVE REPRESENTATIVE 2)

NAME:
DATE:

COMPANY STAMP:

For Office Use Only	
<i>Date Received</i>	
<i>Decision on (date)</i>	
<i>Tick '√' a Relevant Application Outcome</i>	
<input type="checkbox"/> <i>Approved, Membership No</i>	
<input type="checkbox"/> <i>Pending</i>	
<input type="checkbox"/> <i>Rejected</i>	
<i>Other comments:</i>	