

**PERSATUAN SETIAUSAHA SYARIKAT MALAYSIA**  
**Malaysian Association Of Company Secretaries**  
**(Prescribed Body under Section 139A (a) of the Companies Act, 1965)**

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**MALAYSIAN ASSOCIATION OF COMPANY SECRETARIES**  
**(Prescribed Body Under Section 139A(a) Of The Companies Act, 1965)**

**MEMBERSHIP UPDATE FORM**

Name (Mr./Mrs./Ms./Mdm./Others) : \_\_\_\_\_

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

Membership Grade : [ ] Fellow [ ] Member [ ] Provisional  
[ ] Associate [ ] Student

Date of Birth : \_\_\_\_\_ Race : \_\_\_\_\_

NRIC No. : \_\_\_\_\_ (New) \_\_\_\_\_ (Old)

Correspondence Address : \_\_\_\_\_  
\_\_\_\_\_

Telephone No. (H) : \_\_\_\_\_ H/P No : \_\_\_\_\_

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

Present Occupation : \_\_\_\_\_

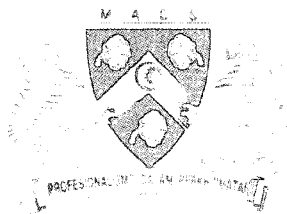
Professional Status (CA 1965) : [ ] Qualified under S139A(a) of Companies Act, 1965  
[ ] MACS [ ] MAICSA [ ] MIA [ ] MICPA [ ] Malaysian Bar  
[ ] S139B licence holder (Licence No.: LS \_\_\_\_\_)  
*\* Kindly enclose your latest valid licence from the CCM.*

MACS / PSD recognised qualification(s) : [ ] MACS Graduate [ ] BA [ ] B. Commerce/Business  
[ ] B. Econs [ ] MBA [ ] Others: \_\_\_\_\_  
[ ] Professional qualification : \_\_\_\_\_

Practising Profession : [ ] Company Secretarial Practice  
[ ] Taxation (\*Qualified / \*Unqualified Tax Agent)  
*\* Kindly indicate your Licence No .....  
[ ] Others (Please specify) \_\_\_\_\_*

Other Qualification(s) : [ ] Accounting / Finance / Business  
[ ] Others (Please specify) \_\_\_\_\_

*\*Note : All certified documents supporting the above qualifications/experiences shall be furnished together with the form.*



Name of employer or  
Name of firm /company  
(if self-employed) : \_\_\_\_\_  
 Private Limited Company  
 Public Listed / Unlisted Company  
 Company Secretarial Practice  
 Others (*Please specify*) \_\_\_\_\_  
 Self-employed  Employment

Business / Office Address : \_\_\_\_\_  
\_\_\_\_\_

Telephone No. : \_\_\_\_\_ Fax No : \_\_\_\_\_

Nature of Practice / Business :  Company Secretarial Services  
 Others (*Please specify in detail. If insufficient space please attach  
appendix*): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Are you in public practice ? YES / NO  
If yes, please state the number of years in practice: \_\_\_\_\_ years

Are you a Company Secretary for a public listed company? YES / NO  
If yes, please state the number of PLC which you are acting as Company Secretary : \_\_\_\_\_

I confirm that the information contained herein is true and correct to the best of my knowledge and belief.

\_\_\_\_\_  
Signature  
Date :

**FOR OFFICE USE**

Received on : \_\_\_\_\_

Data processed by / Date : \_\_\_\_\_

Checked by / Date : \_\_\_\_\_

Verified by / Date : \_\_\_\_\_