

## APPLICATION FOR A

## **CORPORATE**



MEMBERSHIP

PERTUBUHAN	UKUR NEGARA BR	JURUTERA RUNEI DARUSSALAM	<b>&amp;</b>	ARKITEK

Phone (Office)

						Entrance	e Fee	Anr	nual F	ee
REF.NO.PUJA/CM/05:			П		Fellow	B\$20	\$200 B\$150			)
					Member	B\$15	0		B\$120	)
INICEDIACE AND ADDITIONAL										
INSTRUCTION TO APPLICANT	wood the condentation and	ما برالي	of o	ua siani	na it		PI	НОТОБ	RAPE	is
<ol> <li>Please ensure that you have read the undertaking carefully before signing it.</li> <li>Please attach:         <ul> <li>2 recent passport size photographs.</li> <li>Copy of IC (for Brunei Citizen and Permanent Resident) or passport (for non-citizen).</li> </ul> </li> <li>Certified true copies of the professional memberships, highest academic qualifications and other qualifications as stated in the application recognised by PUJA (Brunei) signatories.</li> <li>Your Current CV or list of Professional experience.</li> </ol>						2 recent passport size photographs				
3. Copy of application form mu	st be presented during Pro	ofessio	nal	l Intervi	ew.					
4. Membership intake period is	in March and September.									
5. Membership application fee	is B\$10.00.									
PERSONAL PROFILE										
FULL NAME			_							
, 512.10.1012										
Date of Birth										
Nationality										
IC / Passport No.						Colour				
Residential Address										
Correspondence Address										
E-mail Address										
Phone (Home)	Phone (Mobile)									
EMPLOYMENT PROFILE / PRACTION	CAL TRAINING									
Employment Type	Private Practi	ce			Gover	nment Ser	vice			
OR	Salaried									
Practical Training	Tota	l Perio	bd	of Trai	ning YEAR	. N	MONTH			
Practice / Department's Name										
Address										
Position / Designation										

Fax

PROFESSIONAL / ACADEMIC PROF	ÎLE					
Professional Qualifications	1.	ΥΕΔR				
	2.					
	3.					
Highest Academic Qualification						
Other Qualifications	1.					
	2.					
STATEMENT BY THE DRODOSER AN	ND SECONDER (To verify the Applicant's statements as far as possible from their personal know					
	orporate Member of same discipline, recommend him/her worthy of the dist					
Name of Proposer						
From: Practice/Department						
Period of Acquaintance	Signature					
The undersigned PUJA (Brunei) recommendation from personal known	Corporate Member (need not be of same discipline) concur with the owledge:	above				
Name of Seconder						
Period of Acquaintance	Signature					
AREA OF INTERESTS						
I am interested in the following are	ra(s):					
Continuous Professional Development  Media and Publication Professional Practice and Conduct Information and Communication Technology  Others (Please state below)  2.						
UNDERTAKINGS TO BE SIGNED BY	THE APPLICANT					
Conduct of PUJA (Brunei) for the time in finding them in accordance with the provision a <b>Corporate Member</b> or to designate mysunder the powers conferred upon them Corporate Member of the Institution. It is provided that whenever I shall signify in payment of any arrears, which may be duted accept responsibility for the accuracy of	iven above is true and if selected, I shall abide by the Constitution and the Code of Proferore, and that I will accept as final and binding the decisions of the Council on all matters do not not be said Constitution, By-laws and Regulations; and will forthwith crease to describe not self as belonging to the Institution in any form, on receipt of a notice from the Secretary that he by the Constitution, By-laws and regulations, the Council have declared me to be not will further undertake that I will promote the objects of the Institution as far as may be inwriting to the Secretary that I am desirous of withdrawing from the Institution, I shall, are from me at the period, be free from this obligation.  If the particulars contained in this application form and agree that if I am elected the validition of such particulars as required by the By-laws.	ealt with myself as at, acting longer a in power after the				
Signature of Applicant:	Date:					
FOR OFFICE USE ONLY						
Category of Membership:	Fellow / Member					
Result of Application:	Recommended Not Recommended Deferred					
Date of recommendation:	/ / Membership No.					
Signature of Division's Chairman	Signature of Secretary General					