



# The Institute of Corporate Secretaries of Pakistan

(Incorporated Under Companies Ordinance 1984 Limited by Guarantee)

## Membership Form

Reg. No.	S	-							
Final Exm. Attended:									

Attach your recent photograph

### Personal Information:

Name:

Father's Name:

Date of birth:

Age:

Religion:

Nationality:

CNIC No.

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### Residential Information:

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

Phone:

Cell:

Email:

### Official Information:

Organization Name:

Designation:

Department:

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

Phone:

Fax:

Cell:

Email:

Web:

### Qualifications (both academic and professional):

S.	Examination	Board/University/Institute	Year	Grade/Div.
1				
2				
3				
4				
5				
6				

### Professional Experience:

S.	Job Title	Organization		Period	
		Name	Address	From	To
1					
2					

3					
4					
5					
6					

### References:

**Name and Address of 2 persons (members of ICSP or other professional institute of similar status) for reference:** *We, the undersigned to the best of our personal knowledge, do recommend him as a fit and proper person to be admitted as a member of the Institute of Corporate Secretaries of Pakistan.*

Name:	Name:
Membership:	Membership:
Job Title:	Job Title:
Organization:	Organization:
Contact No:	Contact No:
Address: _____	Address: _____
Signature:	Signature:

### Formal Application for Membership:

I hereby apply for admission as  **Licentiate Member**  **Associate Member**  **Fellow Member** of the Institute of Corporate Secretaries of Pakistan and do agree, if admitted, to be bound by the Articles of Association, and any subsequent amendments and/or alterations thereof which may be made, and Bye-Laws and/or Regulations made or to be made effective subsequently.

I warrant that I have truthfully filled the information required in this form. I hereby authorise the Institute of Corporate Secretaries of Pakistan to take up such references and make such enquires as are necessary to consider this application.

I have attached the following documents to fulfil the requirement of membership:

1. Copy of CNIC
2. Experience Certificate (atleast of 3 years for Associate Membership)
3. 2 Recent photographs and a soft copy in JPG format
4. Updated CV
5. Receipt of remittance of Rs. \_\_\_\_\_.

**Date:** \_\_\_\_\_

**Signature of Applicant:** \_\_\_\_\_

### Approval of Membership:

S.	Committee	Remarks	Signature & Date
1			
2			
3			