



CPM (Asia) Qualifying Examination - Registration Form

CLOSING DATES:

1st MARCH 2024 FOR APRIL 2024 EXAMINATIONS /
1st SEPTEMBER 2024 FOR OCTOBER 2024 EXAMINATIONS

Print or type your name as you wish it to be shown on official CPM records including Transcript and Certificate.

Miss Ms. Mrs. Mr. Dr. (Please tick ✓ boxes as appropriate)

Full Name: _____
(Please write clearly and underline surname)

National Identification No./Passport No.: _____ Country of Birth: _____

Date of Birth: _____ Contact No.: _____

Nationality: _____ Race: _____

MAILING INFORMATION (Please write clearly and give full details)

Preferred Mailing Address Company Home

Company Name (As it appears on enclosed business card)

Company Address (Do not use PO Box)

Street

Suite/Floor

City

State/Province

Country

Zip/Postal Code

Office Telephone No: _____ Fax: _____ E-mail: _____

Home Address (Do not use PO Box)

Apt. No

City

State/Province

Country

Zip/Postal Code

Home Telephone No.: _____ Area Code ()

EDUCATION QUALIFICATIONS

Please tick the highest qualification you have attained

'O' Level or Equivalent 'A' Level or Equivalent Diploma Degree Others (please specify) _____

Please specify your other qualifications (academic and/or professional) including any professional/management courses attended (state the university/institution)

Beginning with your **current position**, list only **full-time**, paid employment.

	Current Position	Prior Position #1	Prior Position #2	Prior Position # 3
Dates (Month and Year) From/To				
Job Title				
Description of Job				
Management Level (senior, middle or junior)				
Name of Firm				
Describe Main Business Activity of Firm				

* If space is insufficient, please continue on a piece of paper.

1. I would like to register for the CPM (Asia) Qualifying Exam for the period:

Apr _____ (fill in year) Oct _____ (fill in year)

2. Subjects I wish to enter:

Marketing Research Integrated Marketing Communications Marketing Strategy
 Asia Business Asia Marketing Management

3. In registering for Qualification of the Certified Professional Marketer, CPM (Asia) Status, I agree to all conditions as to its eligibility, Examination and other requirements of the CPM (Asia) which AMF has adopted.

4. I agree that to be awarded the CPM (Asia), in addition to passing the 5 examinations, I must meet the requirements for 3 years of marketing experience, high standards of professional and business conduct.

5. I have enclosed certificates of my academic qualifications and evidence of working experience.

6. Please do not attach payment. We will invoice you upon acceptance of your application.

7. I certify that all the information and statements in this application are complete and true.

Date: _____ Signature: _____

Endorsed by National Marketing Association (state):

Date: _____ Signature: _____

Please return Registration Form through your local national marketing association:

INSTITUTE OF MARKETING MALAYSIA
 Block C-3A, Sunway PJ51A,
 Jalan SS 9A/19, 47300 Petaling Jaya,
 Selangor Darul Ehsan.

♦ TEL: 03-7874 3089 / 7874 6726 ♦ FAX: 03-7876 3726
 ♦ EMAIL: imm.malaysia@gmail.com ♦ WEBSITE: www.imm.org.my