



CSI World Headquarters

Suite: 33-01, 33rd Floor, Menara Keck Seng,
203, Jalan Bukit Bintang, 55100 Kuala Lumpur,
Malaysia.

www.csiworldhq.com



ASSOCIATE CSI MEMBER APPLICATION (Membership Is A Privilege)

I. QUALIFICATIONS FOR MEMBERSHIP

There are several categories of membership: Undergraduate; Associate CSI (ACSI); Certified System Investigators (CSI); Certified System Investigator with Specialization [CSI (FRM/DF/CP/FSF)] and Fellow CSI (FCSI). This application is for Associate Membership only. After being approved as an Associate, you may complete a separate application to become a CSI if desired.
*(*Subject to passing the Professional Qualifying Examination or meeting the minimum credit points by accredited way of other Professional Certification and/or Training)*

There is a mandatory need for yearly renewal for the ACSI membership. The application fee is non-transferable and is non-refundable once approved.

Indicate Membership Level Desired (Incomplete applications will not be processed):

- Associate – 1st time Application (USA/Asia Pacific)**MYR 100.00
- Associate – Renewal (USA/Asia Pacific)**MYR 100.00

II. APPLICANT INFORMATION

Salutation: Dr. Prof. Mr. Mrs. Ms.

Name:

Current address:

City:	State:	ZIP/Postal Code:
Country:	Email:	
Contact No:	Mobile No:	Fax No.:

III. EMPLOYMENT INFORMATION

Organization:

Office address:

City:	State:	ZIP/Postal Code:
Country:	Office No:	Fax No.:
Position:	Business Email:	

Preferred Mailing Address: Home Business Office

IV. EDUCATION

Highest Qualification:	Second Qualifications:
Professional Certification:	Affiliation/Member of:

V. EXPERIENCE

How many cases of suspected system deficiency have you investigated or uncovered? Approximate number required. Please include all cases resolved or not: _____

Official Use Only

Received on:	OTP Fees Paid:	<input type="checkbox"/> Yes <input type="checkbox"/> No
Received by:	Status of membership:	<input type="checkbox"/> Approved <input type="checkbox"/> KIV <input type="checkbox"/> Rejected

If you answer yes to any question below, submit a detailed description of the incident (s) with your application and supporting documentation.

1. Have you ever written audit or security programs designed to detect system deficiency?	<input type="checkbox"/> Yes <input type="checkbox"/> No
2. Do you have experience in computer-related security?	<input type="checkbox"/> Yes <input type="checkbox"/> No
3. Have you ever conducted original research or written articles in a systemic risk-related field?	<input type="checkbox"/> Yes <input type="checkbox"/> No
4. Have you ever qualified as an expert/consultant in accounting or systemic risk-related matters?	<input type="checkbox"/> Yes <input type="checkbox"/> No
5. Have you ever served on professional committees?	<input type="checkbox"/> Yes <input type="checkbox"/> No
6. Do you have any special qualifications in a systemic risk-related area?	<input type="checkbox"/> Yes <input type="checkbox"/> No

VI. CERTIFICATION

I certify that the above is true and correct to the best of my knowledge. Falsification of any information on this application is grounds for denial or revocation of membership. If this application is accepted, I agree to abide by the Bylaws and Code of Professional Ethics of the Certified System Investigators. Membership is a privilege and not a right. Qualifications are established by the Board of Governors (CSI), whose decisions are final. I consent to the storage of my personal data in the CSI's offices in Malaysia, Singapore, in its regional offices, and by its local chapters.

Signature _____

Date _____

VII. MEMBERSHIP SERVICES

- Subscribe me to the free CSI e-newsletter and add me to your mailing list for any updates on CSI
- CSI Partners are free to contact me for any CSI endorsed courses
- I am interested to attend this/next year's CSI World Conference. Please send me more information

VIII. ONE-TIME PROCESSING FEE

**The One-Time Processing (OTP) Fee is distinct and separate from the USD250.00 Membership Application Fee.*
Please take note: The OTP Fee is payable even if the Membership Application Fee of USD250.00 is waived. Application submitted without payment or supporting will not be processed.

One-Time Processing Fee (non-refundable):

Malaysia..... MYR 50.00
 Singapore & Other Regions..... USD 15.00

IX. PAYMENT METHOD

- Cash Bank Transfer Cheque (Payable to CFE-IN-PRACTICE)

Bank Name: Public Bank
Bank Branch: Jalan Raja Chulan
Account Name: CFE-In-Practice
Account No. : 3145502629

X. FORM SUBMISSION

Submit this completed form by:

Post
 Membership and Admissions Dept. CSI World Headquarters
 Suite: 33-01, 33rd Floor, Menara Keck Seng,
 203, Jalan Bukit Bintang, 55100 Kuala Lumpur, Malaysia.

Email/Fax:
 Brenda Ng
brenda@csiworldhq.com
Fax:+603 2116 5999

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