

ADVANCEMENT TO FELLOW APPLICATION FORM

(PLEASE COMPLETE IN BLOCK CAPITALS)



PART 1: PERSONAL DETAILS

Salutation	:				
Full Name as per NRIC/ Passport	:				
Primary Email Address	:				
Secondary Email Address	:				
Identification Type	:	<input type="checkbox"/> Passport <input type="checkbox"/> NRIC			
Membership Number	:				
Nationality	:				
Date of Birth	:		Gender	:	<input type="checkbox"/> Male <input type="checkbox"/> Female
Mobile Number	:		Office Tel.	:	

PART 2: ADDRESS DETAILS

1. Home Address	:	<input type="checkbox"/> Preferred mailing address			
Address Line 1	:				
Address Line 2	:				
City	:		Postcode	:	
State	:		Country	:	
2. Office Address	:	<input type="checkbox"/> Preferred mailing address			
Address Line 1	:				
Address Line 2	:				
City	:		Postcode	:	
State	:		Country	:	

PART 3: PERSONAL ASSISTANT'S INFORMATION (OPTIONAL)

Personal Assistant's Name (PA)	:				
PA's Contact Number (If applicable)	:		PA's Email Address (If applicable)	:	

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PART 4: CURRENT EMPLOYMENT (NOT APPLICABLE FOR RETIRED APPLICANT)

Organisation	:	
Job Level	:	<input type="checkbox"/> Board of Director <input type="checkbox"/> Senior Management <input type="checkbox"/> Others _____
Job Designation	:	

PART 5: MOST RECENT EMPLOYMENT (APPLICABLE ONLY FOR RETIRED APPLICANT)

Organisation	:	
Job Level	:	<input type="checkbox"/> Board of Director <input type="checkbox"/> Senior Management <input type="checkbox"/> Others _____
Job Designation	:	
Last Employment Date	:	

PART 6: YEARS OF EXPERIENCE IN BANKING-RELATED BUSINESS (SELECT AT LEAST ONE)

Applicant should have substantial and significant experience in banking-related business for at least 15 years with significant exposure in at least one (1) of the following key area of banking:

Select	Banking-related Business	Years
<input type="checkbox"/>	Retail Banking	
<input type="checkbox"/>	Commercial Banking	
<input type="checkbox"/>	Corporate Banking	
<input type="checkbox"/>	Islamic Banking	
<input type="checkbox"/>	Wholesale Banking	
<input type="checkbox"/>	Wealth Banking	
<input type="checkbox"/>	Financial Banking	
<input type="checkbox"/>	Payments	

Select	Banking-related Business	Years
<input type="checkbox"/>	Operations	
<input type="checkbox"/>	Credit	
<input type="checkbox"/>	Risk	
<input type="checkbox"/>	Markets & Treasury	
<input type="checkbox"/>	Capital Planning & ALCO	
<input type="checkbox"/>	Compliance	
<input type="checkbox"/>	Others: _____	

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PART 7: LEADERSHIP EXPERIENCE

Position held in a senior strategic leadership role in the banking industry in the last 5 years:

1	Start Date (MM/YY)	:	
	End Date (MM/YY)	:	
	Organisation	:	
	Job Designation	:	
	Key Achievements	:	

2	Start Date (MM/YY)	:	
	End Date (MM/YY)	:	
	Organisation	:	
	Job Designation	:	
	Key Achievements	:	

3	Start Date (MM/YY)	:	
	End Date (MM/YY)	:	
	Organisation	:	
	Job Designation	:	
	Key Achievements	:	

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PART 8: CONTRIBUTIONS TO THE FINANCIAL SERVICES INDUSTRY

Describe your contributions to the financial services industry and/or AICB or other affiliated financial institutions under Bank Negara Malaysia.

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AICB

ASIAN INSTITUTE OF CHARTERED BANKERS

PART 9: COMPLY TO FIT AND PROPER CRITERIA

Please confirm that you comply with the criteria below on a continuing basis.

Please tick Yes or No to the following questions.

YES	NO	QUESTIONS
<input type="checkbox"/>	<input type="checkbox"/>	Have you been the subject of any proceedings of a disciplinary or criminal nature, or subject of any impending proceedings or any investigations which might lead to such proceedings?
<input type="checkbox"/>	<input type="checkbox"/>	Have you violated any laws or regulations meant to protect the public due to dishonesty, incompetence, or malpractice?
<input type="checkbox"/>	<input type="checkbox"/>	Have you or any business you control or influence been investigated, disciplined, suspended, or reprimanded by any regulatory or professional body, court, or tribunal?
<input type="checkbox"/>	<input type="checkbox"/>	Have you engaged in any deceitful, oppressive, or improper business practices that reflect poorly on your professional conduct?
<input type="checkbox"/>	<input type="checkbox"/>	Have you ever been dismissed, asked to resign, or resigned from a position of trust or employment due to questions about your honesty and integrity?
<input type="checkbox"/>	<input type="checkbox"/>	Have you been involved in a business that was refused registration, authorization, membership, or a licence, or had such credentials revoked?
<input type="checkbox"/>	<input type="checkbox"/>	Have you held a position of responsibility in the management of a business or financial institution that has gone into receivership, insolvency, or involuntary liquidation or managed a corporation that has been wound up by a court or authority, or had a licence revoked, either within or outside Malaysia?
<input type="checkbox"/>	<input type="checkbox"/>	Have you acted unfairly or dishonestly in your dealings with customers, employers, auditors, or regulatory authorities?
<input type="checkbox"/>	<input type="checkbox"/>	Have you significantly contributed to the failure of an organization or business unit?
<input type="checkbox"/>	<input type="checkbox"/>	Have you shown a strong objection or lack of willingness to maintain effective internal control systems and risk management practices?
<input type="checkbox"/>	<input type="checkbox"/>	Are you involved in any business or relationships that could materially pose a conflict of interest or interfere with your judgment when acting in a key responsible position, potentially disadvantaging the Institute or its interests?
<input type="checkbox"/>	<input type="checkbox"/>	Do you have any unsatisfied judgement debts, served with a bankruptcy petition or its equivalent, and are you able to fulfil your financial obligations whether in Malaysia or elsewhere, as and when they fall due?
<input type="checkbox"/>	<input type="checkbox"/>	Have you ever been subject to reprimand, sanction or conviction for any offence involving bribery, fraud or dishonesty?

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If you have answered "Yes" to any of the questions in the declaration above, please provide a detailed explanation of the circumstances in the space provided below. Failure to answer honestly and disclose relevant information may result in the withdrawal of any awarded Fellowship.

I confirm that I comply with the Fit and Proper criteria on a continuing basis.

Signature:

Date:

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PART 10: PROPOSER AND SECONDER

Please provide us with the contact information of your proposer and seconder who can endorse your application. These individuals may be:

- i. Current Fellow Chartered Bankers of the Institute
- ii. Current/Former employers
- iii. Individuals familiar with the applicant through professional or educational capacity

Both the proposer and seconder must have known the applicant for **at least two years**. Kindly ensure that these individuals are contactable and can verify your substantial contributions to banking and the objectives of the Institute, as we may contact them if needed.

Proposer

i.	Full Name as per NRIC/ Passport	:	
ii.	Job title	:	
iii.	Employer	:	
iv.	How long have you known the proposer? (Years)	:	
v.	Contact Number	:	
vi.	Email	:	

Seconder

i.	Full Name as per NRIC/ Passport	:	
ii.	Job title	:	
iii.	Employer	:	
iv.	How long have you known the seconder? (Years)	:	
v.	Contact Number	:	
vi.	Email	:	

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PART 11: DECLARATION

1. I hereby declare that all information submitted in connection with this application is true and accurate to the best of my knowledge, and I understand that the Institute reserves the right to verify any information I have provided in this form and hereby consent to the disclosure of any information required from a third party for such purpose. I undertake to at all times adhere and abide by the Institute's [Constitution](#), [Bye-Laws](#), [Code of Professional Conduct](#), [Disciplinary Regulations](#) and [Continuing Professional Development Regulations](#) and other requirements as may be issued from time to time by the Institute.
2. I hereby authorize the use of the information provided in this form for the purpose of processing my application for Fellowship and for evaluating whether I meet the Institute's criteria for Fellowship. If you wish to review our Personal Data Protection Notice, please follow this link: [PDPA Notice](#)
3. I consent for my Fellowship application and supporting documentation to be shared with the AICB Council and relevant Committees.

Signature:

Date:

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SUPPORTING DOCUMENTS REQUIRED (APPENDIX)

All applicants must complete the forms and provide all necessary supporting documentation to facilitate the review process.

1. Latest Curriculum Vitae
2. Written Statement on why you would like to apply for the Fellowship of Chartered Banker
3. Continuing Professional Development (CPD) – Please submit proof of your learning activities for the past 12 months. For more information on acceptable learning activities for CPD, please click [here](#).
4. Any other documents requested by the Institute from time to time for the purpose of processing the application.

*Important dates:

Application Submission Date – 12 August to 13 September 2024

Application Result Date – Quarter 1, 2025