

Application for

re-election to membership

**The Institute of Chartered
Secretaries and Administrators (ICSA)**
(Australian Division)

Governance Institute of Australia Ltd
ABN 49 008 615 950

ID no

1. Personal details (Please print clearly)

Prefix (Mr, Miss, Ms, Mrs) First name Middle name Last name

Preferred name Date of birth / / dd/mm/yyyy Gender Male Female

Residential mailing address

Suburb State Postcode

Country Home no ()

Mobile no Home email address

2. Personal preferences

Mailing address (tick one only) Work address Home address Email address (tick one only) Work address Home address

3. Business details

Name of company Position title

Business mailing address

Suburb State Postcode

Country Work no ()

Fax no () Work email address

Year commenced current position Year commenced with current employer Years in workforce

I attach a current up-to-date résumé as evidence of my professional experience

Are you the person responsible for governance in your organisation? Yes No or for another organisation? Yes No

Shareholders' funds \$ Annual revenue \$ Total number of employees Number of staff reporting to you

4. Academic qualifications and professional membership (tick as many as appropriate)

BA BBus BCom BEc LLB MBA Other

Institution attended Course name

Actuaries Institute Chartered Accountants Australia and New Zealand (CA ANZ)

Australian Corporate Lawyers Association (ACLA) The Law Society/Institute

Australian Institute of Company Directors (AICD) Financial Services Institute of Australasia (FINSIA)

Australian Institute of Management (AIM) The Tax Institute

CPA Australia (CPA) Other (please list details below)

I attach an academic transcript(s) as evidence of my qualifications (if not previously provided).

5.1. Organisational information (tick one only)

<input type="checkbox"/> Public unlisted	<input type="checkbox"/> Proprietary company	<input type="checkbox"/> ASX listed	<input type="checkbox"/> Public listed
<input type="checkbox"/> Consultant/self-employed	<input type="checkbox"/> Not-for-profit	<input type="checkbox"/> Government	

5.2. What industry are you in? (tick one only)

<input type="checkbox"/> Agriculture	<input type="checkbox"/> Govt — Local	<input type="checkbox"/> Insurance	<input type="checkbox"/> Retail
<input type="checkbox"/> Construction	<input type="checkbox"/> Govt — State	<input type="checkbox"/> Manufacturing	<input type="checkbox"/> Sporting Clubs & Associations
<input type="checkbox"/> Education	<input type="checkbox"/> Govt — State-Owned	<input type="checkbox"/> Media	<input type="checkbox"/> Telecommunications
<input type="checkbox"/> Energy	<input type="checkbox"/> Health & Aged Care	<input type="checkbox"/> Mining	<input type="checkbox"/> Transport
<input type="checkbox"/> Financial Services	<input type="checkbox"/> Hospitality & Tourism	<input type="checkbox"/> Property	<input type="checkbox"/> Wholesale
<input type="checkbox"/> Govt — Business Enterprise	<input type="checkbox"/> Import/Export	<input type="checkbox"/> Public Practice — Accounting	<input type="checkbox"/> Other (specify below)
<input type="checkbox"/> Govt — Federal	<input type="checkbox"/> Information Technology	<input type="checkbox"/> Public Practice — Law	<input type="text"/>

5.3. What are your areas of interest and/or professional responsibilities? (tick as many as appropriate)

<input type="checkbox"/> Accounting/Finance	<input type="checkbox"/> Compliance — International	<input type="checkbox"/> Insurance	<input type="checkbox"/> Risk Management
<input type="checkbox"/> Annual Report	<input type="checkbox"/> Consumer Law	<input type="checkbox"/> Intellectual Property	<input type="checkbox"/> Share Registry
<input type="checkbox"/> ASIC Reporting	<input type="checkbox"/> Contracts	<input type="checkbox"/> Internal Audit	<input type="checkbox"/> Statutory Registers
<input type="checkbox"/> ASX Rules	<input type="checkbox"/> Corporations Act	<input type="checkbox"/> Investor Relations	<input type="checkbox"/> Superannuation
<input type="checkbox"/> Audit	<input type="checkbox"/> Employment Law	<input type="checkbox"/> Legal Advice	<input type="checkbox"/> Tax Agents
<input type="checkbox"/> Bankers	<input type="checkbox"/> Environment Law	<input type="checkbox"/> Meetings & Minutes	<input type="checkbox"/> Taxation
<input type="checkbox"/> Board	<input type="checkbox"/> Governance	<input type="checkbox"/> OHS	<input type="checkbox"/> Trade Marks/Copyright
<input type="checkbox"/> Company Secretarial	<input type="checkbox"/> Human Resources	<input type="checkbox"/> Privacy	<input type="checkbox"/> Treasury
<input type="checkbox"/> Compliance — Australia	<input type="checkbox"/> Information Technology	<input type="checkbox"/> Property	

6. Referees (To be completed if your membership of Governance Institute lapsed more than two years ago)

We, the undersigned, having known the applicant for the period shown against our names (of at least 12 months), recommend him/her from our personal knowledge of him/her, for election to membership. **Please note: as a referee, if the applicant is re-applying for Fellow membership, and you are not currently a Fellow of Governance Institute, it is required that a written character reference letter about the applicant accompany this application form.**

First referee

Full name	Position title		
<input type="text"/>	<input type="text"/>		
Full address	Suburb	State	Postcode
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Telephone (business hours)	Email address		
() <input type="text"/>	<input type="text"/>		

Are you a Fellow member? (please tick if applicable)

Fellow ID no I have known the applicant for years

Signature Date

Second referee

Full name	Position title		
<input type="text"/>	<input type="text"/>		
Full address	Suburb	State	Postcode
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Telephone (business hours)	Email address		
() <input type="text"/>	<input type="text"/>		

Are you a Fellow member? (please tick if applicable)

Fellow ID no I have known the applicant for years

Signature Date

7.1. Character and standing

Please answer YES or NO. If yes, give details on a separate sheet

- (a) Are you an undischarged bankrupt or are your affairs currently subject to an arrangement with creditors, or other external administration, or are any such proceedings pending against you?
- (b) Within the past five years have you been convicted of any offence of such a nature that, had you been a member of ICSA and Governance Institute at the time, would have been likely to have given rise to disciplinary action being taken against you by ICSA under Bye-Law 56.8?
- (c) Within the past five years, have you conducted yourself, whether by act or default, in a manner that, had you been a member of ICSA and Governance Institute at the time, might have been likely to be discreditable to ICSA and Governance Institute having regard to the Governance Institute Code of Ethics?

I, certify that my answers given to the above Bye-Laws, questions and information contained within this form are true and correct. If admitted, I undertake to be bound by the Constitution of Governance Institute, the Charter and Bye-Laws of ICSA, compulsory Continuing Professional Development (CPD) requirements and Code of Professional Ethics and Conduct copies of which have been provided to me.

Signature

Date

7.2. Privacy notice

Governance Institute of Australia Ltd collects personal information about you so that we can provide you with the services you have requested. We may also use your information to manage professional conduct issues, improve our products and services and offer you our or our sponsors', partners' or suppliers' products and services which may be relevant to your needs. We may disclose personal information about you to third party contractors (eg mailing houses, conference organisers), who may be located in Australia, the UK or the USA, but if we do so we take steps to ensure that your privacy is respected. We may also disclose your information to the Institute of Chartered Secretaries and Administrators in the UK if you are a member of this institute. Our privacy policy contains information about how you can access and correct the personal information we hold about you, or make a privacy complaint. It is available from our website governanceinstitute.com.au or from our offices. In regard to promotional material, please indicate below.

I do not want to receive communication in any format from Governance Institute sent on behalf of its sponsors, partners or suppliers, or

I do not want to receive communication in any format from Governance Institute about its own publications, information and events.

8. Membership fees (GST-free)

\$ Re-election fee
\$ Membership fee
\$ Total amount payable

Please contact Governance Institute's Membership Manager on (02) 9223 5744 or 1800 251 849 (toll free) to obtain the amount for re-election and membership fee.

Method of payment

Cheque — made out to Governance Institute of Australia Ltd

MasterCard Visa

Card no

Expiry date / Name on card

Signature

Date

Name and address of cardholder if other than yourself

Office use only

Graduate Associate Fellow Date of election

Source Semester ICSA no

ID no Year

I certify that this candidate has provided all necessary information and supporting details:

Signature — Australian Division Chief Executive

Date