

RECENT
PASSPORT
SIZE
PHOTOGRAPH

INSOLVENCY PRACTITIONERS ASSOCIATION OF SINGAPORE LIMITED

APPLICATION FOR ADMISSION AS FELLOW / ASSOCIATE

	(FULL NAME)
of	
	(ADDRESS)
	itted as a fellow / associate of the Insolvency Practitioners Association of Singapore Limited ar low / Associate Insolvency Practitioners Association of Singapore (FIPAS) / (AIPAS).
I certify that this is the	first time I am applying to be a Fellow / Associate.
I have passed the *exan	nination in / for the
	(Academic Degree, Professional Examination or Equivalent)
administered by	on
	(Name of Society / Institution)
I enclose \$	as payment of the admission fee and the subscription for
	(Year)

^{*} Photocopy of Certificates to be certified. Please see "Directions" below.

1.	(i)	Name in fu		n IC	2 / Pas	sspor	t:																						
	(ii)	Sex: + Male	e / Fei	nale																									
	(iii)	(iii) Date of Birth (dd/mm/yyyy): / / / /																											
	(iv)	Place of Bi	irth:																										
2.	(i)	Nationality	/:																										
	(ii)	⁺ Identity (Card N	lo./	Pass _]	port l	No:						(lası	: 3 ni	umbe	ers p	olus	alph	abei	t e.g	SX	YXX	123.	Z)					
	(iii)	+ Work Per	mit /	Emp	loym	nent F	ass N	o.:						(las	t 3 n	umb	ers	plus	alpi	habe	et e.g	g SX	XXX	X12.	3Z)				
3.	Qualification (other than that stated in item 3 on front page):																												
4.	Home	Address:																											
	Telep	hone No.:									(H)		E	-ma	il:														
											(HP	P)																	
5.	Name	and Addres	ss of C	Offic	e:																								
	Telep	hone No.:										Ex	kt						Fa	ax N	lo.:								
	DID:																						<u> </u>	<u> </u>	<u> </u>				
6.	Addre	ess to which	corre	spon	denc	e sho	uld b	e sei	nt:																	\exists			
7.	Prese	nt employer	and p	ositi	on he	eld:																							
8.	If you are also carrying on business, state the name and nature of the business:																												
9.	Have	you ever be	en coi	nvict	ted of	f any	crimi	nal o	offe	ence?	+Ye	s /]	No																
10.		you ever be s:													ben	efit	of	you:	r cre	edito	ors?	⁺ Y	es /	No	. If	yes,	, giv	ve 	-

⁺Delete classification which is not applicable.

Position Held Chronologically with Dates (Applicants are required to forward testimonials from their employers, each giving a brief description of their dutic and responsibilities. Photocopies of testimonials addressed To Whom It May Concern 'may be submitted if they are not addressed to IPAS but originals must be produced for inspection.) 2 character referees (not close relatives). (i) I	Give brief description of expe	erience:									
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of	2 character referees (not close	e relatives).									
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⁺Delete classification which is not applicable.

13.	I am not the subject of any investigation by any governmental or other relevant authority in respect of any offence involving dishonesty nor am I aware of any matter that could give rise to any complaint against me for professional misconduct / save and except* $^{\#}$
14.	Any other information you desire to submit which might assist the Board of the IPAS in making a decision on the application.
ī	
-,	(Narne, Address and Occupation)
declare	that the information contained in this application is true to the best of my knowledge, information and belief.
	Signature
Declare	d at day of
	Before me
	Signature
	Name of CA Singapore / Advocate & Solicitor

^{*}Delete as appropriate *Please give full details of investigation / complaint and your defence

DIRECTIONS

When submitting your application, please ensure that your application form has been correctly completed and that the following are enclosed:

- (i) certified true copies of your certificates, including transcript / notification of results. Photocopies to be certified by a member/associate/fellow of ⁺ IPAS / ISCA / Law Society / or Registrar of a local university (or other tertiary education institution).
- (ii) testimonials covering your working experience up to the date of your application. Each testimonial should specify the period of your employment, with exact commencement and cessation dates, your job title and a brief description of your duties. Photocopies to be certified by a member/associate/fellow of [†]IPAS / ISCA / Law Society / or Registrar of a local university (or other tertiary education institution).
- (iii) fees payable:

FEES PAYABLE FOR FELLOW / ASSOCIATE

	S\$
Admission Fee – Fellow/Associate	100.00
Admission Fee – life Fellow	380.00
Annual subscription - Fellow	200.00
Annual subscription - Associate	150.00
Subscription – life Fellow	3,800.00

- (iv) details of the insolvency jobs that you have previously handled, indicating
 - (a) the level and extent of your involvement in the conduct of the jobs; and
 - (b) any negative or adverse matters which may impact on your application. Examples of such matters include any convictions, disciplinary proceedings or determinations, adverse judgments or orders, or settlements on basis of fault, which have been made against or entered into by you or your firm on matters which you have been involved in. If none, please state so.

A person who is admitted on/after the lst day of July in any year shall pay only half the subscription that is payable for a year.

The cheque for the required fees should be crossed A/c Payee only and made payable to the "Insolvency Practitioners Association of Singapore Limited".

Associates shall be admitted as such if they have submitted satisfactory evidence of having obtained at least three years of approved practical experience. Fellows shall be admitted as such if they have submitted satisfactory evidence of having obtained at least seven years of approved practical experience. Life Fellows need to pay a one-time admission fee of \$380 and a one-time subscription of \$3,800 for life fellowship with the Company.