

PERTUBUHAN SALIRAN MESRA ALAM MALAYSIA MALAYSIAN STORMWATER ORGANISATION (PPM-044-14-06012010)

d/a BAHAGIAN SALIRAN MESRA ALAM,

Jabatan Pengairan Dan Saliran Malaysia,

Jalan Sultan Salahuddin 50626 Kuala Lumpur, Malaysia

http://msowater.org.my Tel: +6010 6549675 Fax: +603-26972941 E-mail: mso.renewal@gmail.com

TYPE OF CERTIFICATION/ RENEWAL:						
CPESC C	ESSWI	CPSWQ	MY-CISEC MSO			
1(A) PERSONAL PARTIC	ULARS					
Name:		🔲	Male Female			
Prefix (please circle Mr./Mrs.	/Ir./Dr/Dato'/Datin/0	Other title (please	specify)			
Home Address:						
Postcode	.Town:		State:			
Tel: No. (Mobile)	(Oi	ffice):				
E-mail						
Date of Birth: (mm/yy)						
Nationality	І	.C. No (for Malaysia	ans)			
1/D) DDECENT EN DI OVI						
1(B) PRESENT EMPLOY	MENI					
Position	Organisa	ation				
Office Address	• • • • • • • • • • • • • • • • • • • •					
Postcode	Town		State			
1 osteode	10wii		Juite			
2. TYPE OF ORGANI	SATION (Please T	ick)				
	`			7		
Government	Institution of Higher	Learning	Service			
Consulting	Research & Develop	ment	Others (please specify)			
Contracting	Manufacturing/Supp	lies				
	811					
3. RENEWAL DETAI	LS					
Certification/Renewa (circle where applicable)	l Type: CPESC/ C	ESSWI/ CPSWQ	/ MY-CISEC/ MSO			
Certification Number :						
Expiry on:						
MSO Membership No	0:					

4.	PAYMENT DETAILS					
	Payment Amount: RM					
	Payment Method:					
		Payable to Malaysian Stormwater Organization gian Saliran Mesra Alam, JPS Malaysia, Jalan Sultan				
	* If via bank in / Cheque to the account bel 8001364810 Malaysian Stormwater Orga					
	Cheque No./ Bank Draft No					
	Upon payment, e-mail and attach the proof of payment and any changes to contact details if applicable. Please state your name and/or Invoice Number as reference in the bank-in slip.					
	For any enquiries, call MSO Executive Assistant @ 010-6549675.					
5.	AFFIRMATION STATEMENT					
		SSIONAL DEVELOPMENT REQUIREMENTS FOR THE r details. PDH Requirements are applicable to those who wish to				
	(SIGNATURE & DATE)					
	I SHALL AT ALL TIMES OBSERVE CERTIFED PROFESSIONAL (see over	E AND COMPLY WITH THE CODE OF ETHICS AS A erleaf for details)				
	(SIGNATURE & DATE)					
FOR C	OFFICE USE ONLY					
Date Re	eceived:	Application Approved by Executive Committee				
Member	rship No	by Executive Commune				
Type of Certification A. CPESC B. CESSWI		President				
C. CP D. MY	PSWQ Y-CISEC	Secretary				
E. MS	SO Membership Renewal Only	Treasurer				

Fully completed form should be forwarded to:

MALAYSIAN STORMWATER ORGANISATION,

d/a Bahagian Saliran Mesra Alam, Jabatan Pengairan Dan Saliran Malaysia,

Jalan Sultan Salahuddin, 50626 Kuala Lumpur.

Tel: +6010 6549675 Fax: +603-2697 2941

E-mail: mso.renewal@gmail.com

		ucation: (Atleast 5 hours per year for CPSWQ/CPESC / Atlea		C)		
1(a) Form	nal Education, trainin	ng activities, seminars, technical sales presentations & works	hops (time weighted factor = 1)			
		PDH Activity - Title/Description	Organisers Name & Location		Time (Hou	
No.	Date			Actual	Weight Factor	Allowable Weighted CPD Hours
			7	otal Weighte	d Hours =	
			Total Allowable Weighted C	CPD Hours (No	Limits) =	
2) Catego	ory B : Presentation, I	Papers, Publications & Technical Review (time weighted factor	or = 1)			
				Time (Hours)		
No.	Date	PDH Activity - Title/Description	Organisers Name & Location	Actual	Weight Factor	Allowable Weighted CPD Hours
			1	otal Weighte	d Hours =	
	Total Allo	wable Weighted PDH (Maximum 11 hours per year for CPSW	Q/CPESC / Maximum 8 hours per year fo	or CESSWI/MY	'-CISEC) =	

3) Catego	ory C : Informal	Learning Activities				
3(a) On Jo	ob Learning / Pe	erforming Certification Related Work Activities (time weighted fac	tor = 0.5)			
No.		Date PDH Activity - Title/Description	Organisers Name & Location	Time (Hours)		
	Date			Actual	Weight Factor	Allowable Weighted CPD Hours
				al Weighte		
3(b) Priva		al Allowable Weighted PDH (Maximum 4 hours per year for CPSW ime weighted factor = 0.5)	Q/CPESC / Maximum 3 hours per year for C	ESSWI/MY	'-CISEC) =	
					rs)	
No.	Date	PDH Activity - Title/Description	Organisers Name & Location	Actual	Weight Factor	Allowable Weighted CPD Hours
Total Weighted Hours =						
Total Allowable Weighted CPD Hours (Maximum 4 hours per year for CPSWQ/CPESC / Maximum 3 hours per year for CESSWI/MY-CISEC) =						
		TOTAL ALLOWABLE WEIGHTED	PDH			

CODE OF PRACTICE

All Certified Professionals/Registrants are obliged to improve the standing of their profession by rigorously observing the following Codes of Practice.

Failure to conform may result in suspension or deregistration. All registrants shall:

Act professionally, accurately and in an unbiased manner;

Strive to increase the competence and prestige of their profession;

Not to undertake any job that I am not competent to perform;

Not to represent conflicting or competing interests and to disclose to any client or employer any relationship that may influence my judament;

Not to accept any inducement, commission, gift or any other benefit from any interested party or knowingly allow colleagues to do so;

Not to intentionally communicate false or misleading information that may compromise the integrity of any ESCP design; and

Not to act in any way that would prejudice the reputation of the Certified Professionals Registration Scheme or the Certified Professionals registration process and to co-operate fully with any inquiry in the event of any illegal breach of this code.