



THE MALAYSIAN
INSURANCE INSTITUTE

YEAR 2017

No. 5, Jalan Sri Semantan Satu, Damansara Heights, 50490 Kuala Lumpur
Tel : 03 - 2087 8882 Fax : 03 - 2093 7642 Website : www.insurance.com.my

APPLICATION FOR REASSESSMENT

- Basic Certificate Course in Insurance Loss Adjusting (BCCILA)**
- Intermediate Certificate Course in Insurance Loss Adjusting (ICCILA)**

Date of previous assessment Center

1. Name of Candidate

2. NRIC No. (new) (Old)

3. Principle Company

4. Correspondence Address

Postcode State

5. Contact No. Tel (O) Fax

H/P Email

TRAINING PROGRAMMES ATTENDED (Please fill in the following information - Please tick)

Basic Certificate Course in Insurance Loss Adjusting (BCCILA)
 Moderator's/Trainer's Name:
 Date: Training Centre:

Intermediate Certificate Course in Insurance Loss Adjusting (ICCILA)
 Moderator's/Trainer's Name:
 Date: Training Centre:

I would like to apply for the following assessment - Please tick)

Basic Certificate Course in Insurance Loss Adjusting (BCCILA)
 Assessment Date : 25 March 2017 10 June 2017 9 September 2017 9 December 2017
 Closing Date : 6 March 2017 22 May 2017 21 August 2017 27 November 2017

Intermediate Certificate Course in Insurance Loss Adjusting (ICCILA)
 Assessment Date : TBA

Payment Options / Reassessment Fee (Inclusive of 6% GST): RM74.20 (BCCILA) RM127.20 (ICCILA)

Cash Payment
 Enclosed is a Bankdraft / Money Order no. for RM_____ made payable to the **Malaysian Insurance Institute**
 Direct Bank in to MII account : **2-64160-00004670, RHB Bank Bhd**
 Please charge RM_____ to my credit card VISA MASTERCARD
 Card no: Expiry Date: CVV No:

Card Holder Signature: _____

FOR OFFICE USE

Data Posted : Remarks: _____