	The Institute of Crisis and Risk Management				k							
	CST Membership Application							se affix ent photo				
Section A	Per	sonal [	Details	-					L			
Surname:							Initia	als:		Title (Mr/Dr/Miss/M Ms):	Mrs/	
Maiden nam	e, if qualif	cation o	btained under	this surname:			1	L				
First Names	:											]
HKID No:							D	ate of E	Birth:			
Alternate II	O type:	C	] N/A □	Passport	Non-Id	entity Document		Other				
Gender:			Male	Female								
Nationality	(e.g. Chine	se, USA)	:									
Language:												
Highest Qu Full name of Employer:		: [	]F.5 🗌 P	ost-Secondary		iploma 🗌 B. E	)egree	Пм	lasters [	Doctorate	Other	
Position:												
Key Respon	sibility											
Postal/Resic Office /Invoid address												
									Postal Co	de:		
Tel (office):						Tel (home):						
Facsimile:						Mobile Phone:						
E-mail addr	ess:					Alternate	E-Ma	il				
	A: Please ser	a Profes nd an em	ssional / Gener ail to the Instit	al member of th ute if you chang	ne ICRM, je your p	, you opt to receive personal email acc	e certa ount a	in relate nd/or po	ed communio ostal/residen	cation. tial/office addre	ess.	
Section B	Aca	demic	& Employn	nent History	,							
Have you he	ld membe	rship of	the ICRM bef	ore?		Yes	N	lo	Member	rship No. #:		
If YES:	Status: Current / Inactive					Approximate certification o			D:			

# Details of qualifications - Degrees, Honours Degrees, Diplomas within recent three years - please submit copies of the highest qualifications with the application form.

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#### Details of Work Experience (Within recent three years):

Employer	Position	From (DDMMYY)	To (DDMMYY)	

#### If you currently unemployed, or employed outside of the security/training industry, please provide details:

#### Section C References

\*Only required for application to Associateship, Fellowship and Members applying for Reinstatement

#### **Declaration by Reference:**

The Applicant is known to me and I to him/her. I agree to be contacted by the ICRM, for reference purposes.

#### **Reference 1**

First name:		Surname:						
Tel (office):		Mobile Phone:						
E-mail address:								
Signature:			Date: / / 20					
Reference 2								
First name:		Surname:						
Tel (office):		Cell:						
E-mail address:								
Signature:			Date:					
Section D	Fee Structure							
Member CST	Admin/Entrance/Certification Fee And HK\$3000	nual Membership Fee 20 HK\$1000	113/14					
<ul> <li>You will pay the fee once your application has been approved.</li> <li>Please note membership of CST only becomes valid once your membership fees are paid in full.</li> <li>Annual renewal of your membership is only valid if once your annual fee is paid AND you have met the CPD requirements.</li> </ul>								
Postal Address: Unit 2, 20/F., Tower A, New Trade Plaza, 6 On Ping Street, Shatin, NT, Hong Kong Tel: (852) 35210708, Fay: (852) 36905302								

Tel: (852) 35210798 Fax: (852) 36905302 E-mail: <u>info@icrmasia.com</u> Web: <u>www.icrmasia.com</u>

#### Declaration

- I hereby declare that the information provided above is true, accurate and complete to the best of my knowledge and belief. It is true, accurate and complete.
- I am aware that any false statements may invalidate the application and/or disqualify me from becoming a member.
- In addition, I declare that I am aware that The Institute of Crisis and Risk Management is a professional and self-regulated organisation, operated not for gain and that I will support and subscribe to all the aims and activities of the ICRM to the best of my abilities.
- I agree to observe and abide by the Code of Conduct and Professional Ethics of The Institute of Crisis and Risk Management ("ICRM"). In the event of my resignation/termination/cancellation from membership, I agree to pay all arrears of subscription due to ICRM to the date of the surrender of my membership certificate.
- I also confirm that I am aware of the regulations regarding membership, the need to maintain such membership so as to be entitled to display the qualifications initials behind my name and, if applicable, to use a descriptive title.
- I acknowledge that the ICRM Board or its designee may take disciplinary action against me in terms of the Professional Code of Conduct and ethics of Incorporation and I undertake to comply with such action.
- I accept that as a Professional CST member of the ICRM it is a requirement in terms of the ICRM that I complete my required CPD hours per annum to retain my professional designation of CST. Details are available on the ICRM website <u>www.icrmasia.com</u>
- Annual membership fee is payable at the beginning of each graduation date. Please refer to <Membership Category> via ICRM Website (<u>www.icrmasia.com</u>) for the latest fee

After completing this Application Form, please send the application form together with a cheque being application fee and made payable to "**The Institute of Crisis and Risk Management**". Please send the photocopies of your supporting documents to ICRM. <u>No</u> original document is needed at this stage.

Signed this ...... day of ...... 20...... at ......

Signature: .....

Postal Address: Unit 2, 20/F., Tower A, New Trade Plaza, 6 On Ping Street, Shatin, NT, Hong Kong Tel: (852) 35210798 Fax: (852) 36905302 E-mail: <u>info@icrmasia.com</u> Web: <u>www.icrmasia.com</u>

## **APPLICATION PROCEDURES**

### 1. Application

A membership application can be done in person or by mail to ICRM by completing the Application Form together with the application fees and relevant supporting documents.

## 2. Application Form

Application Form may be either:

- downloaded from the ICRM website <u>http://www.icrmasia.com;</u> PDF format, or DOC format; or
- obtained in person at the ICRM office during office hours.

## 3. Checklist for Application

Applicant must fulfill the following requirements before processing his/her application form:

- Application Form signed and dated; and a brief CV;
- Application fee enclosed and cleared;
- Your recent photos;
- Copy of Hong Kong Identity Card; China Identity Card or Social Security Number;
- Supporting documents for academic qualifications and key management experience or responsibilities enclosed;
- Two Referees with professional designation to support the applicant's academic qualifications, management experience and/or professional designation(s); and
- Application for Fellow Membership, please provide a statement of significant recognized contribution to the profession and/or the community, which should be certified by referees and /or recommended by the standing council members of the ICRM.

Please note that only complete applications will be <u>processed and reviewed</u> by the Admission Committee of the ICRM.

#### 4. Submission

• Applicant must submit his/her application form together with a crossed cheque made payable to "The Institute of Crisis and Risk Management" at:

Unit 2002, 20/F., Tower A, New Trade Plaza, 6 On Ping Street, Shatin, New Territories, Hong Kong.

• Upon receipt of the Application Form, the applicant will be informed in due course by email.

#### 5. Notification of Application Result

 Results of Applications will be sent to the applicants within ONE MONTH upon receipt of application

#### 6. Unsuccessful Application

- For unsuccessful applications, <u>no</u> refund of payment (administration fee, entrance fee and assessment fee) will be made but substitution will be accepted in writing.
- The annual membership fee or other paid fees will be refunded to the unsuccessful applicant..

### 7. Use of Information

The information you provide to ICRM will be used for the purpose of administering enrolments and facilitating the execution of the training and development programmes. It may also use for Postal Address: Unit 2, 20/F., Tower A, New Trade Plaza,

6 On Ping Street, Shatin, NT, Hong Kong Tel: (852) 35210798 Fax: (852) 36905302 E-mail: info@icrmasia.com Web: www.icrmasia.com the promotion of other ICRM functions and publications in future, if you do not want receive any our promotional materials in future. Please advise us in writing.

## CODE OF CONDUCT AND PROFESSIONAL ETHICS

### The ICRM - Code of Conduct and Ethics

This Code of Conduct and Ethics signifies a voluntary assumption by members of the obligation of self-discipline above and beyond the requirements of the law. Member shall abide by all professional ethics and service, and proclaims that, in return for the faith that the public places in them, the members accept the obligation to conduct their practices in a way that will be beneficial to society.

Any member, except council members, in ICRM has no right to vote in the Board of Directors and/or The Council Committee Office. The tenure of office for Honorary Executive Council Members will normally last for two years. After expiration, a formal invitation and/or nomination that members should be considered for an official Council position.

The number of Members with which the Institute proposes to be registered is unlimited.

For the purpose of the Institute, there shall be different grades of memberships. (Please refer to the Application & Membership for details.) Members admitted to membership in such grade shall be entitled to use the initials. Membership of any grade of the Institute shall be personal to the Member only and shall <u>not</u> be transferable. The annual subscriptions payable by all classes of Members shall be such as may from time to time be determined by the Institute.

The Institute shall also have power at its discretion to discontinue admissions to any class of membership not bearing Corporate Members or to close down any such class or classes.

Applicants for admission to the Membership shall possess the necessary qualifications appropriately to the grade into which they are admitted.

Every member of the Institute shall be bound to further, to the best of his ability, the objects, interests and integrity of the Institute and shall observe all the Institute's Rules of Code of Professional Conduct.

A member of the Institute shall cease to be a Member:

- a) if such Member resigns by giving notice in writing of resignation
- b) if such Member becomes of unsound mind
- c) if such Member fails to renew his/her annual subscription fee
- d) if such Member otherwise ceases to qualify for membership
- e) if such Member's conduct have been prejudicial to interests of the Institute
- f) if such member violates any regulations of code of conduct and professional ethics.

Code of Ethics

a) To conduct myself with Honesty, Integrity, Professionalism and uphold the highest moral principles and avoid any conduct detrimental to my Profession.

b) To promote and guard my own Professional reputation and that of my Professional Institute.

c) To uphold the Objects of the Institute and abide by the rules, and code of professional business ethics of The Institute of Crisis and Risk Management.

d) Individuals certified as Certified Risk Planners are expected to adhere to the *certification's published code of ethics and requirements of continuing professional development (CPD).* Failure to do so may result in removal of certification or denial of recertification.

## ENFORCEMENT

Upon a formal complaint issued against any member of this Institute or other person indicating a violation of any section of this Code of Conduct and Ethics, the Ethics Committee will set up and investigate the allegations and make a recommendation to the Board of Directors and the Council regarding any disciplinary action to be taken against the accused member.

Discipline may range from a formal reprimand and warning to a temporary or permanent suspension from the Institute upon the discretion of the Board of Directors, and the Council.