MEF NEW MEMBERSHIP INTRODUCER (NMI) SCHEME

SECTION A

PARTICULARS OF THE NEW MEMBER (TO BE COMPLETED BY THE P.I.C. OF THE NEW MEMBER (REFEREE)

	ITEM	DETAILS
1	**NAME OF COMPANY**	
2	**MEF MEMBERSHIP ID**	
3	**DATE OF MEMBERSHIP APPROVAL (as stated on approval letter)**	
4	**Name of P.I.C. OF HR/IR, OR the person submitting this NMI Form**	
4 (i)	**Designation of the named person in no.4 above**	
4 (ii)	**Email of the above named person**	
4 (iii)	**Contact number / HP number of the above named person**	

SECTION B

PARTICULARS OF THE REFERRER (INTRODUCER)

	ITEM	DETAILS
1	**NAME OF REFERRER (individual/company/association)**	
2	**CONTACT NUMBER OF THE REFERRER**	
3	**EMAIL ADDRESS OF REFERRER**	
4	**BANK DETAILS OF REFERRER** **BANK:** **ACCOUNT NUMBER:** **NRIC NO.:**	
5	**IS THE REFERRER A MEMBER OF MEF?** **YES** ☐ **NO** ☐	PLEASE STATE NAME OF COMPANY:

I hereby authorize MEF to contact and inform the Referrer that his/her/its particulars above are given by me for purpose of application to NMI reward scheme by MEF.

NAME: _____

COMPANY: _____

EMAIL ADDRESS: _____

CONTACT NUMBER: _____

SIGNATURE: _____

THIS SECTION IS STRICTLY FOR MEF SECRETARIAT USE ONLY

1	**Date received of this NMI form**	
2	**Date of the beginning of this form being processed**	
3	**Validity of Referee info (Section A)**	
4	**Completion of particulars in Section B**	
5	**Validity of Referrer info (Section C)**	
6	**Has the Referrer been contacted?** **Specify Date and Time:**	
8	**Date of payment transfer to Referrer (√)** **To keep transaction proof** ☐ **Email details to Referee and Referrer** ☐	**Date:**
9	**Processed by: (√)** **WPS** ☐ **NN** ☐ **ZOL** ☐ **QILA** ☐	
10	**Date of NMI processing completion**	
11	**NMI REFERENCE NUMBER**	**REF #**

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