	Independent Directors Association in PNG					
Promoting Leadership & Good Governance						
						PERSONAL DETAILS
Title:	Surname:					
Gender: 🔿 Female 🔿 Male	Forename:					
Date of Birth:						
Residential Address:						
Home Telephone:	Mobile:					
Email Address:						
CURRENT ORGANISATION DETAILS						
Organisation Name (in full):						
Organisation Name (in full): Business Address:						
Organisation Name (in full): Business Address: Work Phone Number:						
Organisation Name (in full): Business Address:	Ext					
Organisation Name (in full): Business Address: Work Phone Number: Work Email Address:	Ext					
Organisation Name (in full): Business Address: Work Phone Number: Work Email Address: What is the main activity of your organisa	Ext					

PRIMARY ROLE DETAILS				
Full Job Title:				
Reporting To:				
PROFESSIONAL EXPERIENCE				
Total number of years of professional experience (INCLUDING PRESENT AND PREVIOUS ROLES)	2:			
Number of years a Director/Partner: (IN YOUR PRESENT ORGANISATION)				
Number of years a Director/Partner: (IN YOUR PREVIOUS ORGANISATION)				
Please provide details of your previous organisat (CONTINUE ON A SEPARATE SHEET IF NECESSARY)	ions below.			
ORGANISATION		JOB TITLE		
TURNOVER/BUDGET	_ FROM	(MONTH/YEAR)	_ TO _	(MONTH/YEAR)
ORGANISATION		JOB TITLE		
TURNOVER/BUDGET		(MONTH/YEAR)		(MONTH/YEAR)
ORGANISATION				
TURNOVER/BUDGET	_ FROM			(MONTH/YEAR)
Have you undertaken any Director or Governanc			⊖ Yes	🔿 No
If yes, date attended:(DAY/MONTH/YEAR)	and pro	viuer.		

CONTACT PREFERENCES

Preferred Mailing Address:	○ Home	⊖ Work
Preferred Email Address:	○ Home	⊖ Work

We will send you information and updates on IDAPNG products and services, however, if you would prefer to receive administrative emails only, please tick here \bigcirc

MEMBERSHIP FEES

Member Class:	Annual Fees:	Joining Fee:	Total Due:
Associate	K300	K100	K400
Professional	K500	K100	K600

DECLARATION

I hereby apply for membership of the Independent Directors Association in Papua New Guinea and agree to be bound by its Constitution and all Codes, rules and regulations made under it. The IDAPNG's Constitution and By-Laws appear on our website (www.idapng.org/publications).

I confirm that I do not have any unspent criminal convictions (other than for traffic offences); I am not an undischarged bankrupt; and I am not disqualified (by court order or voluntary undertaking) from being a director of any company or prohibited by law from being a director. I undertake to inform the Association's Board Secretary without delay if I ever become subject to such a conviction, bankruptcy or disqualification.

I undertake to conduct myself, both publicly and privately, in a professional manner and so as to uphold the Association's reputation and standing and not to cause embarrassment or distress to other IDAPNG members or its staff and not to represent publicly the views of the Association or to claim its support, without the consent of the Board (or of an officer or employee of the Association nominated by the Board for such purpose).

I agree that the Independent Directors Association may hold and process all personal and business information which I am supplying with this application form and any further information I supply during the course of my membership. I agree also that IDAPNG may use my Personal Information as set out in the Association's Privacy Policy**.

** The IDA's Privacy Policy is accessible online at www.idapng.org/terms-and-conditions, or from the IDAPNG Membership & Marketing Committee. Information about IDAPNG members is kept strictly confidential in accordance with the Cybercrime Code Act 2016 and Convention for the Protection of Individuals with regard to Automatic Processing of Personal Data (CETS No.108).

Signature

Date

(DAY/MONTH/YEAR)