

4. Performance and Reward Management

5. Employee Relations/Industrial Relations

6. Productivity Management

7. Pension/Retirement Management

8. Other Areas

V. REFEREES

Please give the names and address of TWO persons, not relatives, to act as your referees for providing information about you. The referees must be able to support this application by actual knowledge of your responsibilities, ability and general character.

FIRST REFEREE: YOUR IMMEDIATE SUPERIOR

Name:
Company:
Position:
Postal Address:

SECOND REFEREE: PROFESSIONAL REFEREE (*Preferably a member of the Institute*)

Name:
Company:
Position:
Postal Address:

DECLARATION BY APPLICANT

I declare that the statements made herein are correct to the best of my knowledge and belief and I agree to be bound by the Human Resource Management Professionals Act, 2012, Code of Professional Conduct and Ethics, and the rules and regulations of Institute of Human Resources Management, Kenya, as they currently exist and as they may hereafter be altered.

SIGNATURE

DATE

ID/Passport (Attach Copy)

For Official Use Only

Membership Enrolment Checklist

S/N	Requirement	Yes	No	Remarks
1	Application Form			
2	CV			
3	Recommendation Letter			
4	Academic Certificate			
5	Copies of Professional Certificate			
6	Copy of National ID/PP			

Approval by the Registration Committee

Approved/ Note Approved

Remarks:

Sign: (Chair, Registration Committee)

Date: