



IMA

International
Management Assistants

APPLICATION FORM

Please attach your current Curriculum Vitae and job description if available. This application form is not valid unless accompanied by a C.V. To be sent to :

Suzanne MOLINIER
9, Place de Rungis – 75013 Paris
Tél : 06 15 63 12 46

Personal details

Name: _____

Private address: _____

Tel: _____ Fax: _____

E-Mail: _____ Mobile: _____

Date of birth: _____ Nationality: _____

Languages: _____

Indicate level of fluency: F = fluent, G = good, B = basic

Preferred address for mailing: Private Business

Professional details

Current employer: _____

Address: _____

Tel. _____ Fax _____

E-mail: _____

Number employed: _____ Type of business: _____

Your present position: _____

Held since: _____

Description of present duties: _____

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Other activities

Please specify any profession-related activities of which you would like to inform IMA International Management Assistants

If already member of other professional association(s) please state details (dates, office held, etc.): _____

How do you think you can contribute to the aims of the Association?

What are your expectations from the Association?

How did you get the information of the Association?:

Declaration by the applicant

I wish to apply for membership of IMA International Management Assistants and declare that the statement made herein are correct to the best of my knowledge, and agree to comply with the aims of this association.

Signature of applicant

Date:.....