

# Member Application e-Form



www.mbemyanmar.org  
office@mbemyanmar.org

Fill out All in English.

## PERSONAL INFORMATION

Full Name : Date of Birth :  
NRC Number : Religion :  
Gender : Male Female Other Blood Type :  
Race :

## MARITAL STATUS

Single Married Divorced Widow/ Widower

## CONTACT INFORMATION

Phone No (Viber) :  
Email :  
Full Address :

## EDUCATIONAL BACKGROUND

University / Institute	Bachelor Degree (Name)	Year of Graduate

University / Institute	Master Degree (Name)	Year of Graduate
Yangon Institute of Economics Yangon University of Economics Meiktila University of Economics Monywa University of Economics	MBA (Campus) EMBA (Campus) MBA (Online)	
Other University (Please Specify)		

Duration and Attended Year of MBA Program :  
(E.g., 2 Years, 2014 - 2016)

Number of Subjects Learned in MBA Program :  
Minimum Requirement - 10 Subjects

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Other Education and Qualification :

## WORKING EXPERIENCE (PROFESSIONAL/ EXPERT AREA)

From Year	To Year	Position	Organization/ Company

Industry/ Industries :  
(Eg, Health, Trading and Distribution...)

Description of Interest in joining Myanmar Business Executives Association (MBE)

Recommended endorsed by two existing MBE members or one MBE Member and one Professor of the applicant's attending MBA Program (MBE member's Name, Position, Company, Contact Phone, Email)

- 1.
- 2.

## ATTACHMENTS FOR REQUIRED DOCUMENTS

1. Master Degree in Business Administration minimum 10 subjects
2. MBA Graduation Certificate(s) (Color) (Format - JPG, PNG, PDF)
3. License Photo (Color) (Format - JPG, PNG, PDF)
4. NRC – Front and Back Sides (Color) (Format - JPG, PNG, PDF)
5. Two Recommendation Endorsed Letters by MBE members (Format - JPG, PNG, PDF)
6. Any relevant documents such as educational transcripts and/or occupational recommendations, if requested (Format - JPG, PNG, PDF)

Please complete the application form and attach the required documents. Submit your application via email to **office@mbemyanmar.org**. After submitting your application, kindly notify the Office via phone or via viber at **+959 4200 69902**.

Date :

Signature : \_\_\_\_\_

Digital Signature can send as an attached  
file (Format - JPG, PNG, PDF)

**Fill out the form directly  
using Adobe Acrobat Reader on your Laptop/ Mobile Phone**