



ENGINEERING ACCREDITATION COUNCIL
EAC PANEL OF EVALUATOR

Engineering Accreditation Council (EAC) is the body delegated by BEM for accreditation of engineering degrees. EAC is made up by representatives of the Board of Engineers Malaysia (BEM), The Institution of Engineers, Malaysia (IEM), Malaysian Qualification Agency (MQA) and the Public Services Department (Jabatan Perkhidmatan Awam Malaysia (JPA).

The Engineering Accreditation Council (EAC) would like to invite Engineers who meet the requirements listed below to register as **PANEL OF EVALUATOR**.

- | | Applicant
Please tick [✓] |
|--|---------------------------------------|
| 1) Professional Engineering qualification, and having | <input type="checkbox"/> |
| 2) An accredited Bachelor of Engineering degree with 15 years experience in industry, after registration as Graduate engineer, or | <input type="checkbox"/> |
| 3) An accredited Bachelor of Engineering degree and at least a Master in engineering programme with 10 years experience in teaching engineering degree programme and industrial involvement after registration as Graduate engineer. | <input type="checkbox"/> |
| 4) Having successfully completed the EAC Evaluator training programme. | <input type="checkbox"/> |

- Please return the enclosed form by either:
Fax to 03-7804 9131 or **Email** to eac.bem@gmail.com
- Please contact the EAD office on 03-7804 9776/7804 9851 for all enquiries.

**APPLICATION FORM
EAC PANEL OF EVALUATOR**

To :

Director

Engineering Accreditation Department

Engineering Accreditation Council (EAC)

Board of Engineers Malaysia

Tingkat 9, Kelana Park View Tower

No. 1 Jalan SS 6/2 Kelana Jaya

47301 Petaling Jaya, Selangor

Tel : 03 – 78049776/9851/9862

Fax : 03 – 78049131

e-mail : eac.bem@gmail.com

I am interested to become one of the EAC Panel of Evaluator to evaluate the engineering programme in Malaysia.

Name (as in I/C.) :

P. Eng Reg No :

Designation :

Discipline :

Qualification :

Experience (in years) :

• Academic years

• Industry years

Tel. No :

Fax No:

E-mail address :

Office Address :

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Home Address :

.....

Mailing Address : Preferable (Office/Home)

Experience in accreditation exercise :

• (years)

• (times)

Experience as a panel chair :

• (years)

• (times)

.....
(Signature)

.....
(Date)