



MEMBERSHIP APPLICATION

Members are asked to note that FIU compliance requires annual re-confirmation of membership data and the conduct of due diligence on new and existing customers (Financial Obligations Regulations S. 37). Effective January 2022, all members must submit a completed application form when renewing, along with required evidentiary documents and proof of payment in order for membership to be renewed. Failure to complete submission may result in termination of membership and/or refund of any dues remitted.

* Fields must be completed.

PERSONAL INFORMATION:

*Name:

* first name

middle

* surname

*Gender:

*Date of Birth:

*dd-mmm-yyyy

*ID No.:

*ID No.:

Nationality:

Nat'l DP PP

Nat'l DP PP

Contact Information:

*Home Address:

*Telephone:

phone (home)

mobile

fax

*E-mail:

* primary

alternate

COMPANY AND EMPLOYMENT INFORMATION:

Company Name:

Company Address:

Work Contact:

email address (work)

phone (work)

fax (work)

Company Size:

*Sector:

Department Size:

*Industry:

If "Other" please specify

*** Job Title:**

If "Other" please specify

Area(s) of Expertise:

HR Generalist

Recruitment

Benefits and Compensation

Industrial Relations

Training / Development

Organizational Development

Employee Assistance Programme

Manpower Planning

HRIS

Consultant

Administrative

Other

No. of years HR experience:

No. of years - Total Career:

*** EDUCATION & TRAINING** *(Select the highest qualification and give details of the programme and any other specialist qualifications)*

High School

Technical Diploma

Associate Degree

Professional Certification

First Degree

Post-Graduate Degree

Doctorate

**Specify
Qualification:**

Details:

**Other Specialist
Certifications:**

**Are you currently studying?
If yes, give details**

Yes

No

Programme:

**Institution/
Accreditation Body:**

Membership Engagement & Volunteerism *(Select any activity you would like to join)*

Committees

Advocacy/Policy Development

Business Development /
Marketing

Education & Training

Public Relations

Mentoring

Research & Development

Youth Development

Operational Support to HRMATT

Media / Writing / Editing

Videography / Graphics / Editing

ICT

Legal Advice

Other:

Commercial Activity/Member Partner

Coaching

Counseling/EAP

Compensation/Job Analysis/Evaluation

Market Surveys & Analytics

Policy/Procedure Writing

SHRM (Testing; Facilitation)

Training Design & Facilitation

Other Consulting

***(New Members Only) How did you find out about HRMATT?**

Colleagues

Other word of mouth

TV / Radio

Newspaper / Magazine

Social Media/Web Search

Email

School

Other

*** POLITICALLY EXPOSED PERSONS (PEP) - Self Declaration** *(Select any of the PEP Categories which best describe you)*

In accordance with the Proceeds of Crime Act 2000 (as amended) and the Financial Obligations (Amendment) Regulations 2014, Regulation 20(3), and as a registered NGO, HRMATT is required to undertake Enhanced Customer Due Diligence on members who are classified as a PEP. A PEP shall be considered as an individual who is or has been entrusted with a prominent function either locally or in a foreign country. A person remains a PEP even after they demit office.

***Do you fall into any of the PEP categories as defined below?** No Yes

Domestic PEP or Foreign PEP

Head of State, Head of Government, Government Minister, Senior Member of Legislature
Senior Politician, Senior Government Official, Senior Judicial Officer, Important Political Party Official
Chairman, Board Member, Corporate Secretary, CEO, Senior Executive of a State-owned Corporation or Statutory Board
Military Official

International Organization PEP

United Nations and affiliated International Organization; International Labor Organization
Inter-American Development Bank; Organization of American State
Caribbean Financial Action Task Force

Job Title:

Family Member of a PEP

Spouse/Ex-Spouse	Sibling	Child
Parent/Step-Parent	Half-sibling	Other child of PEP's spouse

Job Title:

Close Associate of a PEP *(select which best describes your association with the PEP)*

Business Partner/Professional Associate: *Individuals with joint beneficial ownership of a legal entity or legal arrangement or other close business relationship with a person.*

Personal Affiliate: *An individual who a prominent member of a political party, or girlfriend/boyfriend/partner of a PEP.*

Name of PEP:

I agree to notify HRMATT if at anytime after this submission, I become a politically exposed person, family member or close associate of a politically exposed person.

***SOURCE OF FUNDS DECLARATION** *(Please indicate main source of funds to used to make payments to HRMATT)*

Emolument Income
Proceeds from Self-employment/Partnership/Company
Other

***BILLING PREFERENCES**

*Send Invoice to:

Self

Company/Other

If "Company/Other":
*Addressee Name

*Job Title

*Contact

*email

*Phone

*Year Last Renewed

*Member ID

I wish to apply for a Fee Adjustment, due to

Retirement

Ill-health

Job loss

Return to full-time school

Duration

To complete your renewal please submit the following to secretariat@hrmatt.com:

- 1) Completed Application Form
- 2) Copy of two (2) valid Photo ID (eg. National ID (front and back); Driver’s Permit; Passport)
- 3) Proof of address (e.g. utility bill or letter from person in whose name it is.
- 4) Copy of Resume/CV
- 5) Proof of loss of income, if fee adjustment was requested (eg. proof of termination, retirement, acceptance for full time studies)
- 6) Copy of payment deposit as proof of payment (after receipt of invoice)

*** DECLARATION by Member or Applicant**

I hereby declare that all of the information above is true, accurate, and completed as far as possible and that HRMATT can rely on such information and representation as may be required by law, unless written notice of change is provided thereafter.

I am willing to accept the objectives of the Human Resource Management Association of Trinidad and Tobago Limited. read

Signature

Date

Please review entries
carefully before submitting

[Make a new submission](#)