



AWARD & RECOGNITION OF MSNT 2025

RESUME COVER PAGE

All applicants must complete every section of the **Resume Cover Page**.

Section A – Participation Category

Please specify the category in which the applicant wishes to participate (select only one):

- | | |
|--|---|
| <input type="checkbox"/> Category 1: Best NDT Operator Level 1 | <input type="checkbox"/> Category 3: Best NDT Training Centre |
| <input type="checkbox"/> Category 1: Best NDT Operator Level 2 | <input type="checkbox"/> Category 4: Best NDT/Inspection Engineer |
| <input type="checkbox"/> Category 1: Best NDT Operator Level 3 | <input type="checkbox"/> Category 5: Best Higher Learning Institute |
| <input type="checkbox"/> Category 2: Best NDT Service Company | |

Section B – Applicant Details *(to be completed only by applicants in Category 1 and 4)*

Name: _____

Contact details: _____

Email address: _____

MSNT membership number: _____

(Please click [MSNT :: Register](#) to register as a "Ordinary/Fellow/Life Member", if the applicant not yet a member)

The applicant's Resume must be reviewed and endorsed by their immediate supervisor:

Immediate Supervisor's name: _____

Title/Position: _____

Signature: _____

Date: _____



Section C - Corporate Organisation, Academy and Institution Details *(to be completed only by applicants in Category 2, 3, and 5)*

Applicant Details

Name (person-in-charge of the organization):

Contact details:

Email address:

Organization Details

Name of the organization:

MSNT membership number:

(Please click [MSNT :: Register](#) to register as a "Corporate Member", if your organization not yet a member)

Section D – Entry Fee Payment

- Payment shall be made by online/bank transfer to:

**Malaysian Society for Nondestructive Testing
Bank Islam Malaysia
12029010019875**

- Payment has been done: ☐ Yes
- The **Proof of Payment** must be attached together with the submission. Please remark "**Entry Fee**" for recipient reference/payment details

Section E – Declaration of Truthfulness

I hereby declare that all information provided in my submission is true and accurate to the best of my knowledge and belief. I acknowledge that any false, incorrect, or misleading information may result in the cancellation of my application.

Signature of Applicant

Name:

Date:

Document Checklist submission:

1. Resume Cover Page
2. Resume / Corporate Resume
3. Proof of Payment

All submission shall be emailed to mhaidar.msnt@gmail.com before **28th February 2026**.