



## MALAYSIAN MEDICAL COUNCIL GUIDELINES & APPLICATION FORM FOR CERTIFICATE OF GOOD STANDING

**Please take note:**

- a. The following information is provided to assist you.
- b. Please read these notes for guidance before completing the Application Form.
- c. You are expected to observe and comply with ALL the terms and conditions stipulated herein.
- d. Not adhering to any of the requirements may result in undue and unnecessary delay in processing your application.
- e. The Malaysian Medical Council will NOT be held responsible for any delay due to your non-compliance with the terms and conditions set herewith.

1. Pursuant to the Medical Act 1971 (the Act), you are required to register with the Malaysian Medical Council (MMC) to practice medicine in Malaysia;
2. You will be eligible for a Letter of Good Standing (LOGS) only if you fulfill all of the following conditions:
  - 2.1 You are registered with the MMC;
  - 2.2 Your name is still borne in the Malaysian Medical Register (Section 11 of the Act);
  - 2.3 There is no disciplinary action pending against you under the Act;
  - 2.4 There is no disciplinary action taken against you under the Act; and
  - 2.5 You have not committed any offence against the Act.
3. The Council will not process any LOGS requests if:
  - 3.1 For its own use; or
  - 3.2 It is used for application to register with the MMC; or
  - 3.3 It is used to practice in Malaysia.
4. To apply for the LOGS you should:
  - 4.1 Complete the application form enclosed herewith;
  - 4.2 Complete all fields;
  - 4.3 Fill in the form with **BLOCK LETTERS** (preferably type-written);
  - 4.4 Submit supporting documents;
  - 4.5 Submit a copy of your NRIC or passport; and
  - 4.6 Pay the processing fee, where applicable, as follows:

Services	Fees
Application of issuance of LOGS certification	RM500
Application of copy of LOGS	RM200
Delivery of documents by registered postal service/ courier service (in Malaysia)	RM20

5. All documents should be certified according to the MMC [Guideline for Document Verification](http://www.mmc.gov.my/images/contents/downloadable/Guideline-doc-verify.pdf). (Please visit the following link: <http://www.mmc.gov.my/images/contents/downloadable/Guideline-doc-verify.pdf>).
6. All payment should be made in bank draft/money order/postal order made out to '***Kumpulan Wang Majlis Perubatan Malaysia***' with the applicant's name and identity card number written behind the payment slip.
7. Completed applications should be submitted to:

***The Secretary,  
Malaysian Medical Council,  
Block B, Ground Floor,  
Jalan Cenderasari,  
50590 KUALA LUMPUR.***
8. Complete applications with supporting documents and payment can be submitted in person or via post.

9. Upon receipt of your application:
  - 9.1 You will be notified of any shortcomings, if any.
  - 9.2 You are strongly advised to respond immediately to our notification.
10. The application will be processed *within 10 (ten) working days* after receiving the *complete set of documents and payment*.
11. You are advised to keep a copy of your submitted application for your own reference.
12. The Council will send the LOGS *directly* to Foreign Medical Council(s) or Professional Licensing Authority(ies). Please state clearly the address(es) where it should be posted. You will be notified by email once it is sent.
13. The LOGS will be sent by ordinary mail. However, if you wish it to be sent through registered mail or courier service, an additional fee will be imposed.
14. Most Foreign Medical Council(s) or Professional Licensing Authority(ies) require the LOGS to be sent directly to them from the MMC:
  - 14.1 However, if you insist to hand it personally, please contact us.
  - 14.2 If you want someone to collect on your behalf, he/she needs to produce a Letter of Authorization from you during collection.
  - 14.3 In the event that the Foreign Medical Council(s) or Professional Licensing Authority(ies) rejects the LOGS personally delivered by you, this is beyond the Council's responsibility and if the LOGS need to be sent from the MMC to the Foreign Medical Council(s) or Professional Licensing Authority(ies), a new application should be submitted.
15. Each LOGS is only valid for a period of not more than *three months* from the date of issuance. You are strongly advised to ensure *when* you need the LOGS and to submit your application accordingly.
16. If your printed name in any of the supporting documents submitted differ, please submit a Statutory Declaration (stating the name as on the identity card is the same individual).
17. If the original documents are not in either Bahasa Malaysia or English, you need to submit translated versions (original and not copy) in either Bahasa Malaysia or English along with certified copies of the document in its original language. Translated documents are only acceptable if carried out by qualified translators such as Institut Terjemahan dan Buku Malaysia (ITBM) or Officers of appropriate Embassy.
18. Please contact us if you;
  - a. Do not hear from us fourteen working days after the application was submitted ;
  - b. Do not hear from us after processing period is over; and/or
  - c. Require any assistance or have any questions.

Your cooperation is greatly appreciated.

Thank you.  
Secretary,  
Malaysian Medical Council.

**Revised:**

First: **18 December 2008.**

Second: **11 June 2009.**

Third: **22 November 2010.**

Fourth: **13 April 2017.**

Fifth: **29 June 2017.**



**MALAYSIAN MEDICAL COUNCIL**  
**APPLICATION FORM FOR CERTIFICATE OF GOOD STANDING**

1. My Particulars:

- 1.1. Name in full (as in NRIC or passport): .....
- 1.2. a. NRIC Number (for Malaysian): Old: ..... New: .....  
 b. Passport No. (for Non-Malaysians) : ..... Citizenship: .....
- 1.3. Contact Number: ..... 1.4. Email Address: .....
- 1.5. Correspondence Address: .....  
 ..... Postal Code: .....
- 1.6. Current Principal place of practice: .....  
 ..... Postal Code: .....

2. My Professional Background:

2.1 Qualifications:

Medical degree	Awarding Body/Institutions	Year
• Basic		
• Postgraduate	1.	
	2.	

2.2 My Experience in Malaysia Since Graduation:

Date	Place of Practice	Designation/Post

2.3 Details of Registration:

a. Provisional Registration : Date of Issue: ...../...../..... Number: .....

b. Full Registration : Date of Issue: ...../...../..... Number: .....

2.4. Last Annual Practicing Certificate Number : Date of Issue: ...../...../..... Number: .....

2.5. Compulsory Service under Medical (Amended) Act 2012: *(Please tick ✓ whichever is appropriate)*

<input type="checkbox"/>	I am still serving my three-year Compulsory Service and it is due to end on ...../...../.....
<input type="checkbox"/>	I completed my three-year Compulsory Service in .....(year)
<input type="checkbox"/>	I had not completed my 3-year Compulsory Service and was granted a postponement.
<input type="checkbox"/>	I had not completed my 3-year Compulsory Service and had not applied for a postponement.
<input type="checkbox"/>	(Others – Please Note): .....

2.6. Disciplinary Action: *(Please tick ✓ whichever is appropriate)*

<input type="checkbox"/>	There is no disciplinary action taken or pending against me by the Malaysian Medical Council.
<input type="checkbox"/>	I had a disciplinary action/s taken against me in ..... (state year) and the sentence was ..... .....

3. My Request:

3.1. I wish to apply for a Certificate of Good Standing and I need it by this date: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

3.2. Please send the Certificate to the Medical Council / Professional Licensing Authority at the following address:

Name/position: .....

Address:.....

.....  
*(If you want the LOGS to be issued to more than one Medical Councils/ Professional Licensing Authorities, please fill up a new application form).*

*(If you insist to hand it personally, please write your address on part 3.2 and kindly be informed that MMC will not be held responsible should any complications arise – refer point 11 through 13 of our guidelines).*

3.3. Reason for my application:( Please tick ✓ where appropriate and submit supporting documents)

	Emigrating country- (Please Note):.....
	Return to own country (Please State The Country):.....
	Overseas Studies/Training: <i>(Please attach documentary evidence &amp; state country)</i> : .....
	Overseas short term employment <i>(Please attach employer’s letter/state country):</i> .....
	Others: .....

4. Payment:

I include the following Bank Draft/Money Order/Postal Order\* made out to '**Kumpulan Wang Majlis Perubatan Malaysia**':

4.1. Bank Draft/Money Order/Postal Order\* No.: .....

4.2. Sum: RM.....

4.3. Name/Location of Post Office/Bank: .....

4.4. Date: .....

(\*: Delete whichever not applicable)

Signature of Applicant: .....

Date :.....

Official Stamp:

For Official Use:

Data Verification and Comments by Disciplinary Unit: *(Please tick ✓ where appropriate):*

	There is NO disciplinary action taken or complaint pending investigation against the practitioner under the Act.
	There is a disciplinary action pending or taken against the practitioner under the Act. Remarks:
	Other:.....

Name of Officer: .....

Signature : ...../...../..... Date: ...../...../.....