

18. COURSES ATTENDED *(List the most recent ones)*

19. STATE YOUR CORE AREAS IN MANAGEMENT EDUCATION, TRAINING OR CONSULTING

20. TRAINING ASSIGNMENTS CARRIED OUT *(List three most recent assignments and attach evidence)*

21. CONSULTING PROJECTS YOU HAVE BEEN INVOLVED IN *(List three most recent projects)*

22. FOR HOW LONG HAVE YOU BEEN INVOLVED IN MANAGEMENT PRACTICE?

23. PUBLICATIONS *(Include Title/Topic, Publisher/Journal and date of publication. Use additional sheet if necessary)*

24. NAMES, ADDRESSES AND PHONE NUMBERS OF TWO REFEREES

25. ANY OTHER RELEVANT INFORMATION

26. SPONSOR *(Not lower than MEMBER Grade of NIM and must be financially up-to-date)*

Name: _____
Contact Address: _____ _____
Phone: _____ Membership Grade: _____
Email: _____

27. DECLARATION

I, declare that the Information given herein is correct to the best of my knowledge and belief. I agree to be governed by the provisions of the Nigerian Institute of Management Establishment Act No. 14, 2003 of the National Assembly and other Bye-laws of the Nigerian Institute of Management as they now exist and as they may hereafter be amended.
..... Signature
..... Date

NOTE: Please return the completed Application Form to:

The Registrar/Chief Executive
Nigerian Institute of Management (Chartered)
Management House
Plot 22, Idowu Taylor Street, Victoria Island,
P. O. Box 2557, Lagos.

For Official Use only	
Date Received	Receipt Number
Name of Officer	Signature and Date
Licence Number	
Official Remarks	