

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

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

20. (a) TRAINING ASSIGNMENTS CARRIED OUT *(List three most recent with proofs)*

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

22. (c) 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)*

a	
b	

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

OR

Right
Thumb
Print

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.....
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	