



Nigerian Institute of Management (Chartered)

22, Idowu Taylor Street Victoria Island, Lagos. P. O. Box 2557, Lagos - Nigeria.

(For Corp Members of NYSC only)

Please use CAPITAL LETTERS

1. Surname First Name Other Names

2. Title [Mr, Mrs, Miss Prof., Dr., etc] 3. Date of Birth [Day / Month / Year] 4. Nationality 5. State of Origin

6. NYSC Primary Assignment Address 7. Permanent Home Address (for Correspondence)

8. Telephone Number(s) 9. E-mail Address 10. State of Deployment

Academic Qualifications-Indicate your highest academic qualification [Degree, A-level/O-level/others]

11. Name of Institution	12. Certificate/Degree attained(Quote discipline)	13. Year attained
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14. Profession e.g. Engineering, Medicine, Law etc.

15. Batch 16. Period of service From To

17. Name of Institutions/Examining Body	18. Qualification obtained	19. Year attained
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20. Declaration by Applicant

I.....,hereby declare that the information given above is accurate in every detail; I agree to be governed by the rules and regulations of Nigerian Institute of Management as may be applicable to me.

Signature.....

Date.....

20. FOR OFFICIAL USE		REMARKS
i	Date application Form was received	
ii	Date application Form was received	
iii	Documents enclosed	
	Registration Officers Name and Signature	

This form must be accompanied with First Bank Teller for the sum of N500.00 paid into NIM Account with First Bank Plc V/Island Branch

A/C No. 2432050011211

Do not make cash payment to any person.