

Nigerian Institute of Public Relations (Established in 1963 and chartered by Decree 16 of 1990)

www.nipr.org.ng

Affix 2 Recent **Passport** Photographs with your name at the Back

APPLICATION FOR MEMBERSHIP

IMPORTANT: PLEASE READ THE ATTACHED GUIDANCE NOTES BEFORE COMPLETING THIS FORM AND ALSO ENCLOSE COPIES OF YOUR CREDENTIALS. L..... hereby apply for admission as a member of the Nigerian Institute of Public Relations and attest to the accuracy of the information contained in this application. I agree to accept the Institute's decision regarding this application. I also agree to submit any further evidence that may be required and to attend a personal interview, if so invited. If admitted, I agree to do all in my power to maintain and enhance the prestige of public relations practice and to adhere to the Code of Ethics Dated this day of 20 Signed **INSTITUTE RECORD** Date Application Recorded: PLEASE NOTE THAT THIS FORM BECOMES INVALID IF Registration Fee Paid & Receipt YOU DO NOT RETURN IT WITHIN ONE YEAR FROM THE No:.... DATE OF PURCHASE. Admitted:.... On: Transferred: FIRST & MIDDLE NAMES:..... RELIGIONLGA.....LGA ORGANISATION:..... BUSINESS ADDRESS (LOCATION AND POSTAL):.... NATURE OF ORGANISATION'S BUSINESS OR ACTIVITY: YOUR POSITION IN THE ORGANISATION:..... RESPONSIBLE TO: TENURE IN THIS POSITION FROM:..... DO YOU DEVOTE SOME/ALL YOUR TIME TO PUBLIC RELATIONS PRACTICE? EXPLAIN NATURE OF DUTIES: IS YOUR PUBLIC RELATIONS WORK RECOGNISED BY YOUR ORGANISATION AS YOUR PRIMARY FUNCTION?...... EDUCATIONAL BACKGROUND (STATE SCHOOL, COLLEGES, UNIVERSITY ATTENDED WITH DATES):.....

Part B - History of Applicant: Please list your appointments over the last 10 years starting with your current post:

For NIPR Use Only	Dates	Name of Organisation
	(Day, Month and Year)	Street Address
	Tenure Started	CityState
	Tenure Ends	Country
		Telephone:
Appointment and to whom i	reporting:	
Specific public relations dut	ties:	
For NIPR Use Only	Dates	Name of Organisation
	(Day, Month and Year)	Street Address
	Tenure Started	CityState
	Tenure Ends	Country
		Telephone:
Appointment and to whom i	reporting:	
Specific public rela <mark>tions dut</mark>	iies:	
For NIPR Use Only	Dates	Name of Organisation
	(Day, Month and Year)	Street Address
	Tenure Started	
	Tenure Ends	CityState
	Terrure Linus	Country
		Telephone:
Appointment and to whom i	reporting:	
Specific public relations dut	iles:	
Part C1 - Academic 8	& professional Qualifications with dates & aw	varding Institutions:
Part C1 - Academic 8	& professional Qualifications with dates & aw	varding Institutions:
Part C1 - Academic &	& professional Qualifications with dates & aw	varding Institutions:

Part C2 - Membership of (other) Professional bodies with dates & Grades:

	Dublications (backs and other published works)
	Publications (books and other published works)
	Print production
	Film or audio-visual work
	Exhibition and display
	Advertising
	Media relations (a) Press
	(b) Radio
	(c) Television
	Conferences and Seminars
	Parliamentary liaison
	Federal, State and Local Government liaison
0.	Relations with special interest groups
1.	Relations with industry and commerce
2.	Community relations
3.	International relations
4.	Employee relations
5.	Consumer and dealer relations
S.	Financial and shareholder relations
.	Research
3.	Communication from and about the public to your employing organisation
9.	Planning, budgeting and managing public relations programmes
0.	Formulating public relations policies

Part E - Endorsement

I have read the statement made by the applicant which are to the best of my knowledge and belief correct. I have studied the guidance note and from my present knowledge consider that the applicant's qualifications warrant consideration being given by the Membership Committee and by the Council to his/her admission to the Grade I have indicate

I hereby vouch as to the good character and general suitability of the applicant. I further agree to provide the Membership Committee with any further guidance it may require

1ST SPONSOR:				
Grade recommended for applicant:				
No. of years you have known applicant:				
Name of Sponsor in capital letters:				
Organisation:				
Membership Grade & Date:				
(Please n	ote that only up-to-date financial members will be Acknowledged)			
2ND SPONSOR:				
Grade recommended for applicant:				
No. of years you have known applicant:				
Name of Sponsor in capital letters:				
Organisation:				
Membership Grade & Date:				
(Please n	ote that only up-to-date financial members will be Acknowledged)			
All application must be accompanied by a remittance covering the Ro	e <mark>gistration fee</mark>			
Amount forwarding in Cash/Cheque (if in cheque, quote Bank & check No.)				
FOR NIPR O	OFFICIAL USE ONLY			
	ER RECOMMENDATION			
Name of Chapter				
Grade recommended for applicant:				
	Signature & Date:			
•				
·	Organisation:			
MEMBERSHIP & AC	CCREDITATION COMMITTEE			
Date processed:				
Admitted/Rejected or Deferred (with reasons):				
If admitted state Category:				
Name & Signature of Chairman:				
Name & Signature of Secretary:				
NATIONAL PRESIDENT REMARKS				