

2019 ELECTION NOMINATION FORM

NATIONAL INSTITUTE OF
MARKETING OF NIGERIA
Chartered by Act No. 25 of 2003



MEMBERSHIP NO.

Position Applied For

Title: Mr./Mrs./Dr./Chief/Prof.

Name of Nominee (Surname First)

Present Membership Grade of Nominee

Postal Address

Telephone Number

Email

Consent by Nominee.....do hereby give my consent to serve asand promise to abide by the rules guiding the election.

Signature _____

Date

SPONSORS' PARTICULARS

1ST SPONSOR

Name: _____

Membership Grade: _____

Membership Number: _____

Address: _____

Name: _____

Telephone No.: _____

Email: _____

Chapter: _____

State of Chapter: _____

Signature _____

Date

2ND SPONSOR

Name: _____

Membership Grade: _____

Membership Number: _____

Address: _____

Name: _____

Telephone No.: _____

Email: _____

Chapter: _____

State of Chapter: _____

Signature _____

Date

FOR OFFICIAL USE

1. Financial Status of Candidate (Membership subscription and Dues)
2. Financial Status of 1st Sponsor (Membership subscription and Dues)
3. Financial Status of 2nd Sponsor (Membership subscription and Dues)
4. Discipline (indictment, disciplinary breaches, on-going investigation against: Candidate, 1st or 2nd Sponsor.)

NB: To obtain nomination form, application fee should be paid into **National Institute of Marketing of Nigeria** account with **Zenith Bank Plc. Account Number: 1014141420**