NLMID No.						FOR OFFICIAL USE ONLY	NIS – OGUN STATE MEMBERSHIP INFORMATION FORM

Instructions:

- Fill using **BLOCK LETTERS ONLY** and the exception is only where you enter email data. Not filling in block letters may void this form.
- **Please submit a Passport Photograph to this form. Write your name on the back and do not staple.**
- Note that information provided below is for administration and welfare purposes only. It will be kept in strict confidence and will not be disclosed to any third party.

PERSONAL INFORMATION

1. Surname	
2. First Name	
3. Middle Name	
4. Maiden Name	
5. Title (e. g. Chief, Pst, Alh)	6. Sex (Tick as √ appropriate) ☐ Male ☐ Female
7. Birth Date DD MM YY	8. NIS OGUN Admission Date DD MM YY
9. NIS Status (Tick as √ appropriate) Fellow ☐ Member ☐ Associate ☐ Probationer ☐ Student ☐	10. Marital Status (Tick as √ appropriate) Married ☐ Single ☐
11. Spouse Name	No. of Children

CONTACT INFORMATION

12. Postal Address	
13. Email Address	
14. Home Address	
15. Home L. G. A.	
16. Personal Phone Number	
17. Organization	
18. Organization Address	
19. Organization L. G. A.	
20. Organization E-mail Address	
21. Work Phone No:	22. Work Mobile No:

ORIGIN INFORMATION

23. State of Origin																											
24. L. G. A. of Origin																											
25. Home Town																											
26. Home Town Address																											
27. Home Town Contact Name																											
28. Home Town Contact Phone																											

NEXT OF KIN INFORMATION

29. Next of Kin Full Name																											
30. Next of Kin Address																											
31. Next of Kin Phone Contact																											
32. Next of Kin Email																											
33. Next of Kin Relationship																											

34. SIGNATURE
Please sign inside the box

35. FOR OFFICE USE ONLY

Recommendations: Membership Accepted ☐ Membership Rejected ☐

Why? _____

_____