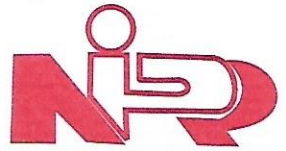


NIGERIAN INSTITUTE OF PUBLIC RELATIONS

(Established in 1963 and Chartered by Decree 16 of June 1990)

MEMBER OF



Professionalism & Excellence



National Secretariat:

Plot A4, A.R.O. Plaza. 2015
Herbert Marcawlay Way,
Zone 6, Wuse, Abuja,
Tel: 07010383277, 09094367076

Lagos Office:

5, Tokunbo Ali Street, Off Toyin Street,
Ikeja, Lagos.
Tel: 08081302618

NIPR NATIONAL COUNCIL ELECTION 2023

NOMINATION FORM

TO BE RETURNED IN DUPLICATE NOT LATER THAN **AUGUST 9TH, 2023**. FORMS NOT SENT TO OR RECIEVED AT ABUJA NATIONAL SECRETARIAT OF THE INSTITUTE ON THE DATE STATED ABOVE WILL BE COUNTED AS INVALID.

I....., HEREBY declare my willingness to stand for election as a **COUNCIL MEMBER** of the **NIGERIAN INSTITUTE OF PUBLIC RELATIONS (NIPR)** established by Decree number 16 of 1990 (now an act of parliament).

..... NAME OF CONTESTANT MEMBERSHIP GRADE
..... NAME OF ORGANISATION DATE OF ADMISSION
..... PRESENT POSITION TELEPHONE NUMBER(S)
MEMBERSHIP IDENTIFICATION NUMBER	
E-MAIL ADDRESS.....	
CHAPTER OF MEMBERSHIP.....	
CONTACT ADDRESS OF CONTESTANT.....	
.....	
.....	

PROFILE OF CONTESTANT.....
.....
.....
.....
.....
.....
.....
.....

(If space above is inadequate, please attach extra sheet)

PROGRAM OF CONTESTANT IF ELECTED.....
.....
.....
.....
.....
.....
.....
.....

(If space is not adequate, please provide extra sheet)

I agree to uphold the provisions of the NIPR Decree No 16 of 1990 and abide by the electoral regulations, code of ethics and Professional Standards of the Institute.

I also submit photocopies of my subscription receipts, certificate of membership, academic/professional certificates and all other relevant documents for your perusal.

.....
NAME **SIGNATURE/DATE**

NAME OF FIRST NOMINATOR.....

MEMBERSHIP GRADE.....

ID No.....**ADMISSION DATE**.....

ADDRESS.....

SIGNATURE/DATE.....

NAME OF SECOND NOMINATOR/SPONSOR.....

MEMBERSHIP GRADE/.....

ID No..... ADMISSION DATE.....

ADDRESS.....

.....

SIGNATURE/DATE.....

(Please attach photocopies of payments of annual receipts and note that any false declaration will nullify your nomination).

**ATTESTATION BY CHAPTER CHAIRMAN ON CANDIDATES PARTICIPATION IN CHAPTER
EVENTS/ACTIVITIES.....**

.....
.....
.....
.....
.....
.....
.....
.....
.....
.....
.....
.....

NAME..... SIGNATURE/DATE.....