



NIGERIAN INSTITUTE OF QUANTITY SURVEYORS

The professional construction cost managers.

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Email: info@niqs.org.ng Website: www.niqs.org.ng

APPLICATION FOR MEMBERSHIP UPGRADE (FELLOW)

PASSPORT
PHOTOGRAPH

*All sections of this form must be duly completed in Block letters

1	SURNAME:			TITLE:
2	OTHER NAMES:			
3	POSTAL ADDRESS			
4	RESIDENTIAL ADDRESS			
5	E-MAIL ADDRESS:			6. TEL NO:
7	DATE OF BIRTH	8. NATIONALITY		
9	MEMBERSHIP NUMBER:	10. DATE OF ELECTION:		

11 QUALIFICATIONS:

A. ACADEMIC (Submit Copies of Certificates)

INSTITUTION	EXAMINATION PASSED

B. PROFESSIONAL (Submit Copies of Certificates)

PROFESSIONAL BODY	STAGE OF EXAMINATION PASSED

12 MEMBERSHIP OF OTHER PROFESSIONAL BODIES

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13 PROFESSIONAL EXPERIENCE

EMPLOYER'S NAME/ADDRESS	DATE	POSITION HELD	DUTIES

14 LIST TITLE OF PAPERS PRESENTED AT SEMINARS, WORKSHOPS OR PUBLISHED SINCE ELECTION AS A MEMBER

15 DESSERTATION: IF YOUR ANSWER TO QUESTION 14 ABOVE IS NONE, YOU WILL NEED TO SUBMIT WITH THIS APPLICATION A DESSERTATION OF NOT LESS THAN FIVE THOUSAND WORDS ON ANY TOPIC RELEVANT TO THE QUANTITY SURVEYING, CAPABLE OF BEING PUBLISHED IN THE NIQS JOURNAL

16 DESCRIBE TYPES OF CONTRIBUTION MADE TO NIQS BENEVOLENT ACTIVITIES SINCE YOUR ELECTION AS A MEMBER

17 DECLARATION

I, PLEDGE TO CONDUCT MYSELF STRICTLY IN COMPLIANCE WITH THE RULES OF CONDUCT AND TO ABIDE BY THE LAWS OF THE NIGERIAN INSTITUTE OF QUANTITY SURVEYORS AND AS MAY BE AMENDED THEREAFTER.

SIGNATURE

DATE

18 REFEREES: NOTE * THE ORIGINAL CERTIFICATES MUST BE SIGHTED BEFORE ATTESTATION BY SIGNING ON THE PHOTOCOPIES
(TWO REFEREES MUST BE FINANCIAL QUALIFIED MEMBERS OF THE INSTITUTE)

i

NAME (IN FULL):	
MEMBERSHIP GRADE:	MEMBERSHIP NO:
SIGNATURE:	DATE:
TEL NO(S)	E-MAIL

ii

NAME (IN FULL):	
MEMBERSHIP GRADE:	MEMBERSHIP NO:
SIGNATURE:	DATE:
TEL NO(S):	E-MAIL

STATE CHAPTER CHAIRMAN / SECRETARY
(ONLY CHAIRMAN OR SECRETARY SHOULD SIGN THIS PORTION)

NAME:
STATE:
E-MAIL:
DESIGNATION:

DATE:
TEL NO:
SIGNATURE:

FOR SECRETARIAT USE ONLY

		DATE	INITIALS
1	APPLICATION FORM RECEIVED		
2	APPLICATION FORM ACKNOWLEDGED		
3	APPLICATION FORM PASSED TO MEMBERSHIP CTTEE		
4	RECOMMENDATION TO THE EXECUTIVE COUNCIL		
5	APPROVAL BY EXECUTIVE COUNCIL		
6	NOTIFICATION OF APPROVAL		
7	ENROLMENT FEE RECEIVED		
8	MEMBERSHIP NUMBER		
9	PUBLISHED IN "THE QUANTITY SURVEYORS"		

MEMBERSHIP COMMITTEE :

APPROVED

NOT APPROVED

COMMENT:

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CHAIRMAN- MEMBERSHIP COMMITTEE

SECRETARY- MEMBERSHIP COMMITTEE
