 (Recognized by Decree No.3 of 1992)

Form No

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| **APPLICATION FOR ELECTION AS STUDENT MEMBER****TO: THE NATIONAL SECRETARY**  | PassportSizePhotograph |
| **CORPORATE HEAD OFFICE**  | **LAISION OFFICE:** |
| NITP - Bawa Bwari House,Plot 2047, Michael Okpara Street, Wuse Zone 5P.M.B. 7012, Garki, Abuja FCT.Tel: 07068276198E-mail: lnfo@ntpng.org; nitpnational@gmail.com website: [www.nitpng.org](http://www.nitpng.org) | Plot P.C 10 Engineering Close, Off Idowu Taylor Street, Victoria Island, Lagos.  |

**Applicants are advised to read ALL instructions carefully before completing this form. Any violation/discrepancies will lead to disqualification.**

**SECTION A**

**1. DECLARATION**

I, Dr/Chief/Mr./Mrs./MS ……………………………………………………………………………………………………………………………………………………………………………….. .            (Full Name in BLOCK LETTERS): Surname to be underlined

as a student/staff of (Name and Address of the Institution) ………………………………………………………………………………………………………………….

……………………………………………………………………………………………………………………………………………………………………………………………………………………………………

*(Full postal address which will be used in the List of Members and for all correspondences in the event of election)* desire to be elected as a Student Member of The Nigerian Institute of Town Planners. I promise that if I am elected, I will abide by and observe the provisions of the Bye laws, that I will pay the subscriptions prescribed for the class to which I am elected and that I will promote the objectives of the institute as far as may be in my power

I declare that I am …………………. years of age and that all the particulars given in this application are true and correct to the best of my knowledge and belief

As witness my hand this ……………….………. day of …………… 20 ………… Signature……………………………………………………………………………………..

1. mail: …………………………………………………………………………Mobile No: ……………….………………….…………………Date of Birth………………………………...

Place of Birth……………………………………..LGA of Origin ……………………………………………. State of Origin …………………………………..……………..

Place of Residence………………………………….……………………………………………….. State of Residence …………………………………………………………………

**2. EDUCATIONAL QUALIFICATION(S)**

Please note that photocopies of certificate/evidence of each presented/acclaimed qualifications must be attached accordingly

1. …………………………………………………………………………………………………………………………………………………………
2. …………………………………………………………………………………………………….…………………………………………………..
3. …………………………………………………………………………………………………………………………………………………………
4. ………………………………………………………………………………………………………………………………………………………..

**3. INSTITUTION(S) OF STUDY**

1. …………………………………………………………………………………………………………………………………………………………
2. …………………………………………………………………………………………………….…………………………………………………..
3. …………………………………………………………………………………………………………………………………………………………
4. ………………………………………………………………………………………………………………………………………………………..

**4. BRIEF SUMMARY OF EXPERIENCE**

Give brief experience and knowledge acquired, which could also include your expectations. This must be written in such a way that it present the main issues accordingly. This should be presented under the following sub-themes in **not less than 100 words in each case.** Where available, plans, drawings, reports etc. should be included to corroborate the relevance of acclaimed experiences.

1. Technical Knowledge and Skills (such as plans, reports, drawings, software, etc.):…………………………………………………………..…

………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………

1. Mentorship/pupilage: ………………………………………………………………………………………………………………………………………………………………………….

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1. Personal Development (conferences, workshops, training, etc.): ……………………………………………………………………………………………….

………………………………………………………………………………………………………………………………………….………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………

1. Integrity: ……………………………………………………………………………………………………………………………………………………………………………………………….

……………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………

1. Leadership Skills, Attributes and Experience: ………………………………………….………………………………………………………………………………...

……………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………

1. Activities on Promotion of public image/perception of the profession: …………………………………………………………………………………..

………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………

1. Activities/participation at the URPSAN Level, State Chapter Level (such as membership of committee, participation in programme, attendance at meetings, etc.): ………………………………………………………………………………………..…………….

………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………

(Use extra sheets if necessary)

I hereby certify that the information contained in SECTION A represent a true account of my details and planning experience up to the time of submission.

Signature of applicant……………………………………………………………………….… Date …………………………………………….

**SECTION C**

1. Enrolment fees and subscriptions are payable on election.
2. **VALIDITY**

 This application form is valid for one year from date of payment only.

**SECTION D**

**ENDORSEMENT**

**Please Note:** Properly cross-check the application form before endorsing it as discrepancies lead to disqualification.

I certify that the applicant Dr/Chief/Mr/Mrs/Miss/Ms …………………………………………………………………………………………………..

is a student in the aforesaid Institution/Establishment and is proposed for election accordingly.

1. URPSAN President/Secretary …………………………………………………………………………………………………………………………………… Membership No: ……………………;Year of Election to Student Member ……………; Signature:………………………..….…; Date:……………………………………………; Address …………………………………………………………………………………………………………………

………………………………………………………………………………………………………………………………………………………………………………………………M/phone: …………….…………………………………………..; Email: …………………………………………………………………………………………………

1. URPSAN Staff Adviser ……………………………………………………………………………………………………………………………………………… Membership No: …………………;Year of Election as Full Member ………………………..; Signature:………………………..….…; Date:……………………………………………; Address …………………………………………………………………………………………………………………

………………………………………………………………………………………………………………………………………………………………………………………………M/phone: …………….…………………………………………..; Email: …………………………………………………………………………………………………

1. Name of Head of Department …………………………………………………………………………………………………………………………………… Membership No: ……………………;Year of Election as Full Member ………………; Signature:………………………..….…; Date:……………………………………………; Address …………………………………………………………………………………………………………………

………………………………………………………………………………………………………………………………………………………………………………………………M/phone: …………….…………………………………………..; Email: …………………………………………………………………………………………………

……………………………………………………………………………….

Official Stamp and Signature

**SECTION F**

**FOR NITP (OFFICIAL) USE ONLY**

**OFFICIAL RECEIPT NO ……………………**

**EDUCATION COMMITTEE**

Chairman's Comments ……………………………………………………………………………………………………………………………………………………….....

Signature ………………………………………………………………………………………………… Date …………………………………………………………………

**MEMBERSHIP COMMITTEE**

Chairman's Comments …………………………………………………………………………………………………………………………………………………………….

Signature ………………………………………………………………………………………………… Date …………………………………………………………………

**NATIONAL COUNCIL**

Council's Decision …………………………………………………………………………………………………………………………………………..………………………

Signature of National Secretary ……………………………………………………………………… Date …………………………………………………………