

# THE INSTITUTE OF FREIGHT FORWARDERS OF NIGERIA

Your Ref. No:

To:

The Secretary,

THE INSTITUTE OF FREIGHT FORWARDERS OF NIGERIA

Lagos, Nigeria

### APPLICATION FOR MEMBERSHIP

I hereby apply for membership of the INSTITUTE OF FREIGHT FORWARDERS OF NIGERIA, subject to the Rules and Regulations/Constitution thereof.

I Certify that the particulars contained in this application are true that I am prepared to verify them if required

ate:		Signature				
PERSONAL PARTICULA	RS: TO BE COMPI	ETED N	TYPEWRITTE	N OR BLOCK	LETTERS	
SURNAME:	10001	OTEHR NAMES:				
PRESENT/PERMANENT CONTACT ADDRESS W P.O. BOX & TELEPHONI NUMBER (IF ANY)	ITH	2330%	D.Valta:	EDI		
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PRESENT EMPLOYERS NAME & ADDRESS		mais auur	accump lintos	d iii Verinadion	opotom.	
NATURE OF EMPLOYED BUSINESS	R'S	YOUR POSITION (Please give details)		AIMAAAH		
TO WHOM RESPONSIB	LE ·					
MEMBERSHIP OF OTHER PROFESSIONAL BODIES (INCLUDING MEMBERSHOF TRADE ORGANISATION) (IF any State grade of membershop)	HIP ON		*	77		
NAME & ADDRESS OF TWO REFEREES	1 Signed:			Date	91.00033011003340375	
(One mus preferably but not essentially be a Corporate grade member of the Institute).	2 Signed:	**************************************				

#### FOR OFFICIAL USE ONLY

## **PREVIOUS CAREER DETAILS**

Give full description of experience including duties, responsibilities and number of employees, if applicable, controlled by you.

(If insufficient space attach a separate sheet or CV (If preferred).

DATE FROM: TO	POSITION & RESPONSIBILITIES	NO. OF SUBORDINATES	& ADDRESS. TYPE OF BUSINESS
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### EDUCATIONAL PROFESSIONAL ATTAINMENTS

Please give details of all exams and / or Professional qualifications gained. Photocopies are to be enclosed in Verification of all qualification claimed.

EXAMINATION	SUBJECTS	RESULTS	DATES
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