



**ELECTION OF OFFICERS AND ELECTED MEMBERS OF COUNCIL FOR THE YEAR 2024/2025
CANDIDATE'S NOMINATION & NOMINEE PROFILE FORMS**

SECTION A: NOMINATE A MEMBER

Candidate's Full Name (the person you are nominating)	
Elective Position	
Nominated by (Sponsor's Full Name)	
Active Status: Have you met your financial obligations to the Institute up till 2024?	
Other Relevant Information	
<p>SPONSOR'S AFFIRMATION:</p> <p>I, confirm that I have met ALL my financial obligations to the Institute and that I hereby sponsor the above-named person to the position of.....</p> <p>Signature..... Date.....</p>	

SECTION B ACCEPTANCE OF NOMINATION

Note: Your one-page profile and manifesto accompanied by your recent headshot photograph (taken within the last 6 months) must be submitted.

Elective Position	
Name (Surname First)	
Membership Grade	
Date of Birth	
Gender	
State	
Date of Admission to CIPM	
Membership Number	
Organization/Employer	
Designation	

Academic Qualifications (Pre-University, First Degree, Second Degree, etc. with Field of Study, Institutions attended, and Dates)	
Valid /Current Human Resource Practitioners' Licence (HRPL) Number. Contestants must have a valid Human Resource Practitioners' Licence (HRPL). Licence validity must be up to Tuesday, April 30, 2024, at the time of nomination. Where the licence will expire between Wednesday, May 1, and the AGM on Thursday, May 23, 2024, contestants shall ensure renewal of their licence or risk disqualification on this ground.	
Do you hold any elective/appointed position in any other professional body? (Yes or No)	
What Professional body?	
What position do you hold?	
Contributions to the Institute (e.g., Chapters, Branches Council, Sponsorship, Projects, etc.). Please attach additional supporting statements if necessary	
Your plans towards achieving the Vision and any of the four (4) Strategic Thrusts within the Institute's 2022-2024 Strategic Plan	
Active Status: Have you met your financial obligations to the Institute up till 2024?	
Other relevant information	
CANDIDATE'S AFFIRMATION I, confirm that I have met ALL my financial obligations to the Institute and that I hereby accept the nomination to the position of..... Signature Date	

SECTION C: BRANCH CHAIRMAN'S ENDORSEMENT

<p>I hereby confirm that the nominee is an active and financially up-to-date member of the Branch.</p> <p>Signature..... Date</p>
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NOTE: This nomination form will not be valid, except if the Sponsor, nominee, and Branch Chairman have completed and signed their sections above. A proxy signature is not acceptable.

Completed candidate nomination and nominee profile forms can be submitted in the Nomination Box **(in a sealed envelope)** stationed in the reception area at **CIPM House, 1 CIPM Avenue, off CBD, Alausa, Ikeja, Lagos** from **Monday, April 22 - Monday, April 29, 2024 (no later than 4.00p.m)**. Nominations received **after** that will be disqualified.