

## **Nigerian Society of Economic Geologists (NSEG)**

31, Shettima Ali Munguno Crescent, Behind Julius Berger Headquarters, Utako Abuja.

Passport

## MEMBERSHIP APPLICATION FORM

(Applicants should ensure that the form is correctly completed)

Title	First Name			Middle Name			Surname				
Date of B	irth			Sex					Marital Status		
Affiliation										Nation	ality
Phone Nu	ımber:		Fax:				Ema	ail:			
Residenti	al Addres	is:				Perm	aner	nt Home	Addr	ess:	
Tresta erre.							4		. , , , , ,		
Desired M	embershi	p Catego	ory:								
Student: Corporate				e: Fellow:			Institutional:			nal:	Others:
Current Membership Status:						Mem	bers	hip Cod	e/Nur	nber:	
Educational Qualification:  Award Subject Class						Τ.	12	11'		Others	
Award	Subject			Class		Awarding Ins			tutional	Others:	
HND											
BSc											
MSc											
PhD											
Others											

Maj	or Are	ea(s) of S	Study:								
Post	Quali	fication \	Work	Experien	ce/Caree	r Progre	ssion				
Dates: Employer,			mployer,	Position 8	& Duties	:					
D		ſ.v									
	tion o	f Years o		erience: in Area of	Dractica	l Evnaria	nco.				
	)	TICK	IVIAI	III Alea Ul	Fractica	Lxperie	ilice.				
	-2										
	-5										
5-	10										
Ove	r 10										
			ner pr	ofessiona	ii bodies: VMGS		NAPE			Others	
Association  Membership Number			VIVIGS		IVALL			Others			
iviei	mbers	snip inum	iber								
кес	eipt N	lumber d	of App	lication F	·ee:						
Indic	ate Su	upporting	g Doc	uments a	ttached:						
		nal Certif			ork Exper	ience	Recommend	lation	Any Oth	ner as Specified	
	sorsh	ip/Endor					-l - /NIl	C:-		D.1.	
SN	SN Sponsor's Name				Code/Number			Signature Date			
1											
2											
3											
						<b>'</b>					
		Applicant's Signature:				Location:			Date:		
	Appl	icant's S	ignatı	ıre:		Loc	ation:			Date:	

Qualification Certificate: Sponsorship/ Endorsement: Work Experience: Fee Payment: Any Other as Specified:	Name	<u>2</u> :	Status/Position:		nature/Date:	
Qualification Certificate:       Sponsorship/ Endorsement:       Work Experience:       Fee Payment:       Any Other as Specified:         Fee Amount Paid:       NSEG Receipt Number/Date:       Assigned Membership Number         Date of Council Consideration:       Approved       Not Approved		<u></u>	FOR OFFICE USE ON	ILY		
Date of Council Consideration: Approved Not Approved			Work Experience:	Fee P	ayment:	
	Fee Amount Paid:	NSEG Rec	eipt Number/Date:	As	ssigned Me	mbership Number
Endorsement: Date:	Date of Council Co	onsideration:	Approved		No	ot Approved
Endorsement: Date:						
		Endorsement:		Da	ate:	