



DISCIPLINE & ACCURACY

RC 658176

Certified Institute of Warehousing And Materials Management

In Affiliation With
WEST COAST UNIVERSITY
Panama City, Panama,
Central America

MEMBERSHIP APPLICATION FORM

ALL ENTRIES IN BLOCK LETTERS

FORM NO: _____

NAME: _____
(Surname First) (Other Names)

DATE OF BIRTH: _____ SEX: _____

STATE OF ORIGIN: _____ NATIONALITY: _____

LOCAL GOVERNMENT: _____

MARITAL STATUS: _____ RELIGION: _____

NYSC COMPLETED (TICK) YES: _____ YEAR: _____ NO: _____

CONTACT ADDRESS: _____

POSTAL ADDRESS: _____

LAND PHONE NUMBER: _____ MOBILE NUMBER: _____

E-MAIL ADDRESS: _____

NAME OF OFFICE & ADDRESS: _____

OFFICE PHONE NUMBER: _____ POSITION: _____

NEXT OF KIN: _____

ADDRESS: _____

EDUCATIONAL INSTITUTIONS ATTENDED WITH DATES

SCHOOL	NAME OF INSTITUTIONS	CERTIFICATE	YEAR
PRIMARY			
SECONDARY			
COLLEGE			
POLYTECHNIC			
UNIVERSITY			
POST GRADUATE			