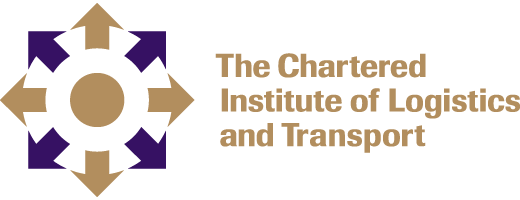
Passport Photo

**MEMBERSHIP APPLICATION FORM**



Please write clearly using BLOCK (CAPITAL LETTERS and BLACK INK)

Surname:

Forename (s)

Mr./Mrs./Other Title:

Insert Grade Requested: AFFILIATE MEMBER (MILT)

If you are unsure which grade to apply for, seek advice

From local CILT Branch CHARTERED MEMBER (CMILT) CHARTERED FELLOW (FCILT)

Please give current grade if any

Contact Address:

Country:

Post code:

Telephone:

Email:

Company Name:

Company’s area of operations:

Country:

Telephone:

Email:

Date Joined Organization:

Current Job Title:

Date Appointed to Current Position:

Number of years of Experience

in Logistics and/or Transport:

IMPORTANT INFORMATION TO THIS APPLICATION FOR MEMBERSHIP: PLEASE SEND A FULL CURRICULUM VITAE, COPIES OF EDUCATIONAL QUALIFICATION CERTIFICATES AND CONTINUING PROFESSIONAL DEVELOPMENT STATEMENT, GIVING FULL DETAILS AS REQUESTED IN THE GUIDANCE NOTES ON THE REVERSE SIDE OF THIS FORM

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **DETAILS OF REFEREES:**  (Three Institute members should recommend Application for Chartered Fellow, two members if applying for Chartered Membership and one if applying for membership)  I have read the particulars of the form which to the best of my knowledge and belief are true and recommend the candidate to the Council for election as Member, Chartered Member, Chartered Fellow of the Chartered Institute of Logistics & Transport. | | | | |
| **NAME OF REFERERS** | **APPOINTMENT HELD** | **MEMBERSHIP NO.** | **MEMBERSHIP GRADE** | **SIGNATURE** |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

**In support of your application you need to submit:**

**YOUR CURRICULUM VITAE AND CONTINUING PROFESSIONAL DEVELOPMENT PLAN - GUIDANCE NOTES**

What needs to be included in your application

1. Your current job position- please describe your job

* Your current position and your responsibilities in your organization
* Your current financial responsibilities if applicable
* The number of employees in your organization and separately the number who report to you.
* The key objectives of the position that you currently hold.
* Your responsibilities for decision making and planning of resource allocation, and financial decision including turn over and budget etc in relation to logistics and transport.
* To whom do you report? Your reporting lines.

1. Your career History

Give brief details of previous organizations, job titles, Date of employment, responsibilities and any other relevant information including any notable achievement you considered should support your application.

1. Your Education and Training

* Describe university degree and subjects taken
* Full details of other professional qualifications including names of the Institutions or awarding bodies dates, and include copies of relevant qualification certificates.
* Other courses and Continuing Professional Development (CPD) you may have taken.
* Enclose copies of relevant certificates.

1. Your Continuing Professional Development
2. As part of the process of applying for Membership, Chartered Membership and Fellowship applicants must include a 2 year CPD plan to their application.

Members of the CILT are required to remain current with development in Logistics and Transport.

1. Suggestion for your CPD plan you may wish to consider including:

* Reading appropriate logistics and transport news items, journals and publications including CILT World and commit to using the web for logistics and transport news and references.
* Supporting local CILT Council or Branches through attendance of relevant meeting and the AGM.
* Where possible attending conferences, seminars and workshops on logistics and transport including but not exclusively those organized by CILT, say once a year as a minimum.
* Providing information to your peers on current practices in logistics and transport.
* Doing a further qualification in logistics and transport.
* Mentoring younger members

1. Institute’s account details for payments:

* Zenith Bank 1012328070 \* Sterling Bank: 0010864826

Please see this CPD plan as an opportunity to think about your own plans and not as a burden.

We suggest you keep a diary for self-assessment of your CPD achievement.

**Declaration**

I certify the statement on this form is correct. I promise that in the event of my election to member or Chartered Status. I will observe the code of Professional conduct, will be governed by Charter and By-Laws of the Institute and will promote the objects of the Institute as far as shall be in my power. If at any point I desire to withdraw from the Institute, I will in accordance with By-Law No 21 after payment of all subscription of other sum due from me including any subscription for the current year, send my resignation to the Secretary General and return therewith any certificate of membership held by me. A copy of By-Law may be obtained from your local branch.

An assessment fee is required to enable the membership grade to be confirmed by the CILT Assessment Panel.

For details of the fee and method of remittance, please contact your local Branch. Before signing please read the notes on the reverse of this form.

Signed \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Application approved by BARNCH/Zone/Chapter Chairman or Secretary

Signed: Date:

**International Secretariat (UK):** The Chartered Institute of Logistics and Transport, Earlstrees Court | Earlstrees Road | Corby | Northamptonshire | NN17 4AX | United Kingdom

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**Liaison Office:** Shippers’ Plaza, Michael Opara Way, Wuse Zone 5, FCT, Abuja. | **Tel:** 08023008855 | **Email:** [ciltngmembership@gmail.com](mailto:ciltngmembership@gmail.com), [info@ciltnigeria.org](mailto:info@ciltnigeria.org) | **Website:** www.ciltnigeria.org