



THE CHARTERED INSTITUTE OF BANKERS OF NIGERIA

2024 ELECTION APPLICATION FORM

POST OF NATIONAL TREASURER

- Note:**
- (a) All applications must be received by the Registrar/Chief Executive not later than Friday, January 12, 2024
 - (b) Envelopes used for returning completed application forms should be marked on the right-hand side: "Election of Officer".
 - (c) Completed application forms to be returned with two recent passport sized photographs of applicant and a copy of his/her Profile of not more than 1000 words stressing his/her contributions to the Institute the banking industry and the Nigerian economy.
 - (d) All applicants including their endorsers/attesters must have paid their annual subscriptions and other dues and are financially up to date as at Friday, January 12, 2024.
 - (e) No member should endorse more than one Candidate.
 - (f) The decision of the Governing Council is final and no correspondence on the election would be entered into except a petition to the CIBN Election Dispute Resolution Committee (CEDRC) whose decision on election petitions shall be final.

POST APPLIED FOR: _____

1). SECTION A

APPLICANT:

a). Names _____
(Surname) (Other names)

b). Membership Number _____ c). Membership Category _____

(Please note that only an **Elected Fellow/Honorary Fellow/Honorary Senior Member/Associate** can contest for the Post of National Treasurer)

c) Residential or Office Physical Address: _____

d) Email _____ e). Tel. Nos _____

Signature _____ Date _____

2). SECTION B

DECLARATION BY APPLICANT FOR ELECTION.

I _____ Membership NO. _____ being a financially up to date member of the Institute, do hereby declare my interest to contest for the post of the National Treasurer of CIBN at the 2018 General Election of the Institute. If elected. I promise to carry out my duties in accordance with the subsisting CIBN Act, rules, regulations and codes and changes therefore from time to time. I also declare that I shall subject myself to and abide by the final decision of the Governing Council and /or the CIBN Election Dispute Resolution Committee (CEDRC) on the election.

Signature: _____ Date: _____

3) SECTION C

1ST ENDORSER

a) Names: _____
 (Surname first) (Other names)

b) Membership No: _____ c) Membership Category: **Elected Fellow/Honorary Fellow/Associate**

d) Residential or Office Physical Address: _____

e) Email _____ f). Tel. Nos _____

Signature: _____ Date: _____

4). SECTION D

2ND ENDORSER

a) Names: _____
 (Surname first) (Other names)

b) Membership No: _____

c) Membership Category: _____ ***Elected Fellow/*Honorary Fellow/*Honorary Senior Member/*Associate**
 (*Delete as appropriate)

d) Residential or Office Physical Address: _____

e) Email _____ f). Tel. Nos _____

Signature: _____ Date: _____

5). SECTION E

ATTESTATION BY 2 (TWO) MEMBERS (FCIB/HCIB/ACIB), ONE OF WHOM MUST BE A CHAIRMAN OR 1ST OR 2ND VICE CHAIRMAN OF A BRANCH OF THE INSTITUTE

(1) NAME(Branch Chairman): _____ 2). Membership No. _____

3). Membership Category _____ Signature: _____ Date: _____

(2) Name: _____ 2). Membership No. _____

3).Membership Category _____ Signature: _____ Date: _____

For Office Use:-

Financial Status:-	Yes/ No
1 st Endorser	Yes/ No
2nd Endorser	Yes/ No
Attestation (Chairman)	Yes/ No
Attestation (A Member)	Yes/ No

