

AWARDS RECEIVED:

WORK EXPERIENCE:

COMPANY

POSITION

DURATION

-----	-----	-----
-----	-----	-----
-----	-----	-----
-----	-----	-----

PROFESSIONAL PUBLICATIONS:

OTHER PROFESSIONAL/INSTITUTES/ASSOCIATIONS:

OTHER PROFESSIONAL ACTIVITIES:

UNDERTAKING:

I, _____ hereby make this undertaking to be a worthy and committed member of International Institute of Professional Security, that I shall contribute to the professional growth and development of the Institute. I also undertake to promote the ideas of the institute, that I shall not do anything that would put the institute into disrepute.

I hereby affirm that the information provided above are factual, that should any of the information so provided be false, the Institute is at liberty to withdrawn my membership.

That the Institute is to publish my name through any means to the public in the even of the withdrawal of my membership of the institute for any offence/crime whatsoever

DATE

SIGNATURE

RIGHT THUMB PRINT

OFFICIAL

APPROVED----- **DISSAPROVED**-----

IIPS MEMBERSHIP CATEGORY-----

MEMBERSHIP NO:-----

DATE OF ELEVATION/ ADDMITTANCE:-----

REMARK:-----

INTERNATIONAL INSTITUTE OF PROFESSIONAL SECURITY (IIPS)

Adebowale House (2nd Floor), 150 Ikorodu Rd, Onipanu, Lagos

E-mail: iips.institute@yahoo.com, info@iipsonline.net

Website: www.iipsonline.net

Tel: 08023440967, 08058558911



MEMBERSHIP FORM

NAME: -----

MEMBERSHIP NO:-----