

NIGERIA INSTITUTE OF INNOVATION & ENTREPRENEURSHIP (NIE)

Established under Corporate Law of the Federal Republic of Nigeria



International Centre of Excellence for Rural Finance and Entrepreneurship,
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MEMBERSHIP Application Form



APPLICATION FEE: Ten Thousand Naira Only (N10,000.00)

BANK DETAILS: 0011339483 ~ Jaiz Bank Account

ACCOUNT NAME: Nigeria Institute of Innovation and Entrepreneurship

PERSONAL INFORMATION

Full Name: _____

Date of Birth: _____

Gender: Male Female Other

Nationality: _____

State: _____

LGA: _____

Contact Address: _____

Phone Number: _____

Linkedin Profile (If available:) _____

MEMBERSHIP CATEGORY

- Career Professional (Entrepreneurial Organization/Government MDA Staff)
 Practicing Entrepreneur (With or Without Formal Education But with Experience)

MEMBERSHIP GRADES

Based on your qualifications and experience, please select the membership grade you are applying for:

- Fellow Member (FNIIE):** Reserved for individuals with extensive experience, significant contributions to the field of innovation and entrepreneurship, and holding senior positions in their organizations or businesses.
- Full Member (MNIIE):** Suitable for professionals with a considerable level of academic and professional qualifications or practicing entrepreneurs with proven track records of success in business.
- Associate Member (ANIIE):** Ideal for individuals who have started their career in innovation and entrepreneurship or are mid-level professionals with some experience and qualification.

CAREER PROFESSIONALS (PUBLIC & PRIVATE SECTOR EMPLOYEES)

Academic Qualifications (Starting From Higher Qualification)

S/N	Institution	Qualification & Discipline	Grade/Year

Professional Qualifications (ANAN, NIM, VILRM etc)

S/N	Awarding Body/Institution	Membership Designatory	Year/Membership Number

Current Employment Details

S/N	Employers	Employer Address	Position	Years of Experience

**Practicing Entrepreneurs
Business Information**

S/N	Name of Business/CAC No.	Business Address	Business Sector	Years in Operation

DECLARATION

I hereby declare that the information provided is accurate and complete to the best of my knowledge. I agree to abide by the rules, regulations, code of professional ethics of the Nigeria Institute of Innovation and Entrepreneurship (NIIE) as contained in its Code of Professional Ethics and other Bye-Laws as they not exist and as may be amended.

Signature

Date

SUBMISSION INSTRUCTIONS: Please Complete and Return This Form Along With Proof of Payment to the Above Email Address, Whatsapp Number (08065883870) Or Submit Directly To Our Office.

FOR OFFICIAL USE ONLY

- Application Received: (Date) _____
- Payment Confirmed: Yes No
- Approval Status: Approved Rejected
- Membership Grade: _____
- Government Council Comments: _____
- Management Comments: _____

Signature

Date