



Chartered Institute of Leadership and Governance (CILG)

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Passport Picture

MEMBERSHIP APPLICATION FORM

CLASS OF MEMBERSHIP APPLIED FOR (Please tick (X) the appropriate box):

Affiliate Associate Full Member Fellow

PRESENT CLASS OF MEMBERSHIP AND MEMBERSHIP NUMBER IF ANY (Please tick (X) the appropriate box)

Affiliate Associate Full Member Fellow

Membership Number:..... Registration Date:.....

1. APPLICANT'S PERSONAL INFORMATION		
Full Name with initials:		
Date of Birth (YYYY.MM.DD):	Gender (Male/Female):	Title: (Mr/Mrs/Miss/Ms/Prof/Dr/Other)
Home Address:	Contact Address for Communication if different from the home address	
Province		
Office Address:		
Telephone:	Mobile:	
Fax:	Passport Number:	
E-Mail Address:	National Identity Card Number:	

2. ACADEMIC QUALIFICATIONS STATED IN CHRONOLOGICAL ORDER WITH RESPECT TO THE YEAR OF AWARD (BOTH SECONDARY AND TERTIARY)					
Period of Study		Name of Institution	Type of Institution (School/ Technical College/ University/ Other -specify)	Qualification Awarded	Date of Award
From	To				

3. PROPOSERS

At least two of the proposers should know the applicant sufficiently to certify, by initialing, that the information provided by the applicant about his training and experience if any is correct.

- All proposers have to be Members of the Institution who are not in arrears of subscription fees.
- For approval as Associate Member: Only two proposers are required.
- For transfer/election as a Member: Four proposers are required and at least one of them will have to be from the same discipline as the applicant.
- For transfer/election as a Fellow: Four proposers are required and at least two of them will have to be Fellows of the Institution. At least one of the proposers will have to be from the same discipline as the applicant.

We, the undersigned, propose (State the name of the applicant)
From personal knowledge as a person worthy of consideration for admission to the class of (State the class of membership) of the Institution.

Proposer's Name with initials	Class of Membership	Membership No.	Signature and Date

4. STATEMENT OF TRAINING AND EXPERIENCE (STATED IN CHRONOLOGICAL ORDER)

From	To	Period in months	Place of work	Position held	Concise description of work carried out	Initials of two of the proposers

5. MEMBERSHIP OF RECOGNISED PROFESSIONAL BODY

Have you obtained Membership of a recognised Professional body? Yes No
 If yes, please state the name of the institute through which the registration was obtained:
 (Please provide documentary proof)

6. DECLARATION

I (NAME OF THE APPLICANT) the undersigned, certify that the information provided above by me is true and that, in the event of my admission as a member of **the Chartered Institute of Leadership and Governance, USA** will be governed by the By-laws, regulations and rules of the Institution as they now are, or as they may hereafter be altered; and that I will advance the objects of the Institution as far as shall be in my power.

Provided that, whenever I shall signify in writing to the Executive Secretary of the Institution that I am desirous of withdrawing of the membership at the Institution, I shall, after the payment of my arrears which may be due from me at that time, be free from this obligation.

Signature of Applicant: Date:

Notes:

The onus of providing sufficient information for a proper assessment of the application will rest with the applicant. All applicants must send with this form, evidence of their academic qualifications, training and experience if any. Authenticated photocopies of relevant documentary evidence will be accepted.
 Applicants for admission to the class of **"Fellow"** are requested to refer the relevant guidelines and familiarize themselves with the additional documentation that needs to be submitted with this application form.
 Applicants for the class of **"Member"** are required to face a **"Professional Review"** and are requested to refer to the currently applicable "Professional Review Rules" where the eligibility requirements and submissions required are detailed out.

Recommendation by Country Director

Applicant is recommended/not recommended for admission to membership

Reason for not recommending.....