

INSTITUTE OF CHARTERED SECRETARIES AND ADMINISTRATORS OF NIGERIA

APPLICATION FORM FOR ELECTION TO COUNCIL

- Note:**
- (a) All applications must be received by the Nominations and Governance Committee not later than 11.59 pm on Thursday, 26th June, 2025 via nominationscommittee@icsan.org
 - (b) Envelopes used for returning completed application forms should be marked on the right-hand side: "Election into Council".
 - (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 industry and Nigeria in general.
 - (d) All applicants including their endorsers/attesters must have paid their annual subscriptions and other dues and are financially up to date as at **31st March, 2025**.
 - (e) No member should endorse/attest 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 ICSAN Electoral Dispute Committee (IEC) whose decision on election petitions shall be final.

1). SECTION A

APPLICANT:

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

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

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 election into Council at the 2025 General Election of the Institute. If elected, I promise to carry out my duties in accordance with the subsisting ICSAN Enabling 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 ICSAN Electoral Committee (IEC)/ICSAN Electoral Dispute Committee on the election.

Signature: _____ Date: _____

3) SECTION C

PARTICIPATION IN INSTITUTE'S ACTIVITIES

e)Email: _____

f). Tel. Nos _____

Signature: _____ Date: _____

7). SECTION G

ATTESTATION BY A GOVERNING COUNCIL MEMBER

Name: _____

Membership No. _____

Membership Category: _____

Signature: _____ Date: _____

For Office Use:-

Financial Status:-	
National dues	Yes/No
Chapter dues	Yes/No
1 st Endorser	Yes/ No
2nd Endorser	Yes/ No
Attestation (Council Member)	Yes/ No