

NIGERIAN LIBRARY ASSOCIATION (NLA)

FELLOWSHIP AWARD FORM

1. NAMES IN CAPITAL LETTERS:(Surname first)

2. LIST OF TERTIARY INSTITUTIONS ATTENDED (WITH QUALIFICATIONS & DATE)

3. PROFESSIONAL ACTIVITIES & POSITIONS HELD AT STATE, NATIONAL/INTERNATIONAL LEVELS

4. MEMBERSHIP OF NLA (State membership dues paid in the last 10 years)

Year	Amount	Year	Amount	Year	Amount	Year	Amount	Year	Amount
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5. SCHOLARSHIPS, PRIZES, AWARDS & HONORS RECEIVED

6. NATIONAL/INTERNATIONAL APPOINTMENTS HELD

7. OUTSTANDING INNOVATIONS IN THE PROFESSION

8. ANY OTHER INFORMATION THAT MAY BE USEFUL TO THE COMMITTEE

Signature & Date: _____