



CHARTERED INSTITUTE OF HUMAN CAPITAL DEVELOPMENT OF NIGERIA

No 21, Gomwalk Boulevard, Jos-Plateau State

5 Otukpo Road, Area 11, Garki Abuja

☎ (+234) 08166222913, 07017667868

✉ cihcdng@gmail.com 🌐 www.cihcdn.org

MEMBERSHIP OPPORTUNITY

Members of the public are invited to apply for admission into the Institute. Preference will be given to practitioners and industry experts in Human Capital Development

PROFESSIONAL MEMBERSHIP CATEGORIES UNDER OFFER/CRITERIA

ASSOCIATE - a.hcd

- A Minimum of B.Sc/HND or its equivalent from any recognized tertiary institution
- Must be a member of a Professional body and(or) have a post-graduate certification
- Must be employed or self-employed or is involved in human capital development. Must have minimum 3 years working experience, NYSC inclusive. Must be fit and proper person.

MEMBER - m.hcd

- In addition to the requirement in (1) above, candidates under this category must be a member of a Professional Body and (or) hold a MBA/MSc or any other Master Degree. Membership of a Professional Body is a precondition.
- Must possess a working experience of not less than 10 years. Must be fit and proper persons.
- They must also show proof of being in managerial positions supervising a minimum of 5 persons.

Methods of Application: Interested persons should send expression of interest for membership via e-mails: membership@cihcdn.org, cihcdng@gmail.com or call the following numbers

+2348055006444 +2348166222913 +2347017667868

- Note:**
1. All applicants shall undergo an intensive training/evaluation exercise.
 2. Submission of Term Paper is a precondition for induction.

MEMBERSHIP FEES

Categories of Membership

<u>MEMBERSHIP:</u> <u>₦129,500</u>		<u>ASSOCIATESHIP:</u> <u>₦92,000</u>	
<u>Broken down as follows</u>		<u>Broken down as follows</u>	
Membership form	₦10,000.00	Membership form	₦10,000.00
Membership fee	₦17,000.00	Membership fee	₦12,000.00
Induction fee	₦27,500.00	Induction fee	₦15,000.00
Annual dues	₦10,000.00	Annual dues	₦5,000.00
Workshop and evaluation fee	₦30,000.00	Workshop and evaluation fee	₦20,000.00
Development Levy	₦10,000.00	Development Levy	₦10,000.00
Examination Exemption fee	₦25,000.00	Exemption fee	₦20,000.00

LIST OF COURSES

COURSE MODULE I	EXEMPTION FEE (₦)
Communication, Interpersonal Relationships and Instructional Design	5,000.00
Transformational Leadership and Performance Improvement	5,000.00
Human Capital Management and Creativity	5,000.00
Entrepreneurship, Creativity and Innovations	5,000.00
Elements of Professionalism, Coaching, Learning and Delivery	5,000.00
Artificial Intelligence (AI), Social Media Management and Learning Technologies	5,000.00
TOTAL	30,000.00
COURSE MODULE II	EXEMPTION FEE (₦)
Diversity Management and Sustainability	5,000.00
Social, Cultural and Emotional Intelligence	5,000.00
Managing Learning Programs and Evaluation	5,000.00
Integrated Talent and Skills Management	5,000.00
Coaching, Mentorship and Knowledge Management	5,000.00
TOTAL	25,000.00

N/B: Waiver(s) may be granted based on Qualification, Working Experience and Area of Specialization



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MEMBERSHIP APPLICATION FORM

Please read through carefully before filling out the form

Affix a
Recent
Colour
Passport
Photo

PART 1: GENERAL INFORMATION

Surname	First Name	Other Names

Title (Mr, Mrs, Miss, Dr. etc)	Nationality	State of Origin	Date of Birth

Organization Name & Address	Address for Correspondence

WhatsApp Telephone Number(s)	Email Address

Job Title	Nature of Work

PART 2: ACADEMIC & PROFESSIONAL QUALIFICATIONS

Names of Institution	Certificate/Degree Obtained (indicate discipline)	Year

Profession (e.g) Accounting, Architecture, Engineering, Insurance, Law, Medicine, (etc.)

<i>Professional Qualifications Name of Institutions/ Examining Body (e.g: NBA, CNA,ACA, NIM,AIPM,CITN,PSN, etc)</i>	<i>Qualifications Obtained</i>	<i>Year</i>

Please submit a copy of your CV along with photo copies of your Academic and Professional certificates (including NYSC discharge/ exemption).

PART 3: EMPLOYMENT HISTORY

List the last three (3) Positions you held in your employment, starting with the current

<i>Name of Organization (from- to-)</i>	<i>Position held (Job Title)</i>	<i>Date(From- to-)</i>

PART 4: REFEREE

Your referee must be a full member of the Institute or Your Head of Department/Employer

<i>Name of Referee</i>	<i>Class of Membership (If a Member of the Institute)</i>	<i>Membership Number</i>

<i>Address</i>	<i>Telephone</i>	<i>E-mail address</i>	<i>Position Held (If HOD/Employer)</i>

<i>Signature:</i>	<i>Date:</i>
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I do hereby recommend the above applicant for membership of the Chartered Institute of Human Capital Development of Nigeria and certify that to the best of my knowledge the experience and character of the applicant are such that I consider him/her fit for admission into membership of the Institute.

PART 5: APPLICANT DECLARATION

I declare that the information given above is to the best of my knowledge and belief correct. I undertake to be bound by the Institute's rules and regulations in force at the time of my admission or which may be from time to time, be issued.

<i>Full Name of Applicant</i>	<i>Signature and Date</i>

COMPLETE AND RETURN TO:

The Registrar/Chief Executive,
Chartered Institute of Human Capital Development of Nigeria
No 21, Gomwalk Boulevard, Jos-Plateau State
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(This form must be submitted with an application fee of **₦10,000.00**
Payable to Institute Account: First City Monument Bank(FCMB): **4274273019**

FOR OFFICIAL USE ONLY:

Application Form Receipt Number	
Date of Receipt	
Other Fees Paid	
Date of Receipt	
Class of Membership Granted	
Membership Number	
Signature of Approving Officer	
Date	