**2023 NIGERIAN SOCIETY FOR MICROBIOLOGY (NSM)** **FELLOWSHIP AWARD**

**CRITERIA FOR FELLOWSHIP AWARD**

**a) Eligibility for Nominator**

- Must be a full/life NSM member in good financial standing

- Must have been a member for at least five (5) years

**b) Eligibility for Nominee**

- Must be a full/life NSM member in good financial standing

- In exceptional cases, non-members with outstanding contribution to the Society/Microbiology may be considered

- Must have made remarkable contributions towards the advancement of NSM/Microbiology/Science

- Must have been a member for at least seven (7) years

**c) Requirements for Nomination**

- Completion of a fellowship award nomination form obtainable at no cost and available on the website.

- Submission of completed form before the deadline (**October 31, 2023**).

- Passport photograph

- Reference letter from two members, one of whom must be a fellow of NSM (to be forwarded directly to the Society (nsmfellowship2023@gmail.com)

- *Curriculum vitae*

- Evidence of participation in conferences

- Good financial standing

**d) Recommendation for Award**

The Fellowship committee shall study and confirm the claims of the Nominators and Nominees, whose documents must have been submitted before the deadline. The committee shall make recommendations to NSM NEC accordingly.

**NIGERIAN SOCIETY FOR MICROBIOLOGY**



**Fellowship Nomination Form**

**2023 Nomination Deadline** ………October 31, 2023………………

A. Nominator Information

1. Title/Name of Nominator: ……………………………………………………..

2. Membership Number: ………………………………………………………….

3. Nominator’s Institution: ………………………………………………………..

4. Full contact address: ………………………………............................................

5. E-mail address: ………………………………………………………………….

6. Telephone Number: ……………………………………………………………..

7. Annual Dues Status: …………………………………………………………….

B. Nominee Information

1. Title/Name of Nominee: ………………………………………………………..

2. Nominee’s Institution: ………………………………………………………….

3. Membership Number (if applicable): …………………………………………..

4. Full contact address: ……………………………………………………………

5. E-mail address: …………………………………………………………………

6. Telephone Number: …………………………………………………………….

7. Annual Dues status (if applicable): …………………………………………….

**C. Academic Qualifications of Nominee**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| S/N | DEGREE/QUALIFICATION | MAJOR FIELD | INSTITUTION | DATE OBTAINED |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

**D. Employment History of Nominee**

|  |  |  |  |
| --- | --- | --- | --- |
| S/N | POSITION | ESTABLISHMENT | DATE |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

**E. Publications of Nominee – List some important publications**

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**F. Contributions of Nominee**

State Nominee’s contributions that have impacted in NSM, Microbiology, Science and Technology, etc

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Please forward the completed form, Nominee’s current CV indicating at least two referees, one of whom must be a fellow of the Society and then passport photograph, to the fellowship email address: **nsmfellowship2023@gmail.com** . Note that referees should forward their report directly to the fellowship email, accordingly.

For Office use only

Financial status: a) Nominator ……………b) Nominee …………….

Committee’s decision: Recommended …. Not Recommended ………

Sign/Date: NSM Finance Officer………., Chairman FAC……………