

MEDIA CAREER DEVELOPMENT NETWORK

MEMBERSHIP FORM

NAME: _____

ORGANISATION/INSTITUTION: _____

ADDRESS: _____

Email: _____ *Mobile number(s):* _____

SOCIAL MEDIA NETWORKS

Blog/website: _____

LinkedIn _____ *Facebook* _____ *Twitter @* _____

Other(s): _____

MISSION STATEMENT _____

QUALIFICATION(S)

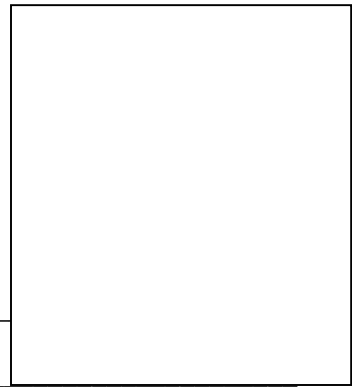
CORE MEDIA SKILLS:

Computer proficiency (please specify)

Internet use proficiency (please specify)

Social media presence (please specify)

WORK EXPERIENCE



AWARDS/FELLOWSHIPS

PROFESSIONAL ASSOCIATIONS/GROUP MEMBERSHIPS

MAJOR CONFERENCES ATTENDED

MAJOR PUBLICATIONS

Books

Conference papers

Lectures

Academic projects

CAREER GOALS

Short Term

(i)

(ii)

(iii)

Long Term

- (i)
- (ii)
- (iii)

SPECIFIC SUPPORT REQUIRED

SIGNATURE

DATE

N.B: Please attach your detailed CV to this form

FOR OFFICIAL USE