ACKNOWLEDGEMENT FORM

I acknowledge receipt of a copy of the NISB HR Policy Manual. I confirm that I have read and fully understood, having been given the opportunity to seek necessary clarifications thereto and hereby accept the contents of this Policy Manual.

I pledge to willingly abide by all the Rules and Regulations contained herein as may be amended from time to time.

NAME OMALE SHAMBU YUNUSA

DESIGNATION/RANK EXECUTIVE OFFICER/7SPEP 2

DEPARTMENT PUBLIC AFFAIRS

STAFF NUMBER: NSIB/P: 172

SIGNATURE/DATE: 03/08/2023