



# **UBORA REGULATED NON-WDT SACCO SOCIETY LIMITED**

UBORA SACCO LTD | P.O Box 54974-00200 NAIROBI, | Tel 254-20-6948443/305/261 | ubora@kebs.org

## **BENOVELENT FUND APPLICATION FORM**

I hereby make application for membership and agree to conform to the Regulations or any amendments thereof:

FULL NAME \_\_\_\_\_

ID/NO \_\_\_\_\_ NATIONALITY \_\_\_\_\_

DATE OF BIRTH \_\_\_\_/\_\_\_\_/\_\_\_\_ AGE \_\_\_\_\_

PRESENT ADDRESS \_\_\_\_\_ CODE \_\_\_\_\_ TOWN \_\_\_\_\_

MOBILE NUMBER \_\_\_\_\_ EMAIL \_\_\_\_\_

EMPLOYER \_\_\_\_\_ DESIGNATION \_\_\_\_\_

TERMS OF EMPLOYMENT \_\_\_\_\_

HR NO \_\_\_\_\_ UBORA MNO \_\_\_\_\_

HOME ADDRESS \_\_\_\_\_ CODE \_\_\_\_\_ TOWN \_\_\_\_\_

Have you ever been a member of this fund? Yes/No (Cross out whichever is not applicable)

If yes state:           BBF membership number: \_\_\_\_\_

HR number: \_\_\_\_\_ UBORA No: \_\_\_\_\_

Year membership ceased \_\_\_\_\_

**NB: One must attach a pay slip as a certificate of being on payroll.**

Signature of applicant \_\_\_\_\_ DATE \_\_\_\_/\_\_\_\_/\_\_\_\_

### **FOR OFFICIAL USE**

DATE OF ADMISSION \_\_\_\_\_

DATE OF CEASATION \_\_\_\_\_

APPROVED BY MANAGEMENT MINUTE NO. \_\_\_\_\_

BBF MEMBERSHIP NUMBER \_\_\_\_\_

\_\_\_\_\_  
**CHAIRMAN**

1. NEXT OF KIN DECLARATION

I, MR/MRS/MISS \_\_\_\_\_ HR NO. \_\_\_\_\_  
M NO. \_\_\_\_\_ ID NO. \_\_\_\_\_ MOBILE \_\_\_\_\_  
E-mail \_\_\_\_\_

2. PRESENT ADDRESS

INSTITUTION \_\_\_\_\_  
ADDRESS \_\_\_\_\_ CODE \_\_\_\_\_ TOWN \_\_\_\_\_

3. HOME ADDRESS

ADDRESS \_\_\_\_\_ CODE \_\_\_\_\_ TOWN \_\_\_\_\_

Do hereby declare the under listed as members of the next of kin for the purpose of Benevolent Fund.

4. NAME OF NEXT OF KIN (Supporting documents: Copies of National ID/ Passport and Birth Certificate(s) for Children)

S/NO	NAME(S)	RELATIONSHIP	DATE OF BIRTH	ID NUMBER	REMARKS
<b>A – SPOUSE(ONE)</b>					
1					
<b>B – CHILDREN</b>					
<b>C- PARENTS</b>					
1					
2					
<b>D - PARENT -IN -LAWS</b>					
1					
2					

I hereby affirm that the information given above is factual and true.

Signature \_\_\_\_\_ date \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_