

ASILI SACCO SOCIETY LTD.

ASILI SACCO BOARD/SUPERVISORY NOMINATION FORM

1. NameEST/Payroll Number.....
2. Employer..... Position Held
3. Duration of Membership (in months)
4. Vacancy applying for, Board member Supervisory Committee
5. "O" Level certificates **Yes/No** **Attach copies of certificates**
6. Membership in other Sacco's **Yes/No** if yes specify
7. Board Member in other Co-operatives **Yes/No.** if yes specify
8. Other Directorships **Yes/No.** If yes specify
9. Compliance with Chapter 6 of the constitution of kenya

	Yes	No
i. Certificate of Good Conduct from Directorate of Criminal Investigations (CID) Yes/No	<input type="checkbox"/>	<input type="checkbox"/>
ii. Clearance certificate from Ethic and Anti-Corruption Commission (EACC) Yes/No.	<input type="checkbox"/>	<input type="checkbox"/>
iii. Tax Compliance Certificate from Kenya Revenue Authority (KRA) Yes/No	<input type="checkbox"/>	<input type="checkbox"/>
iv. Clearance from Credit Reference Bureau (CRB) Yes/No	<input type="checkbox"/>	<input type="checkbox"/>
v. Clearance certificate from Higher Education Loans Board (HELB) Yes/No	<input type="checkbox"/>	<input type="checkbox"/>
10. Have you ever been convicted of any crime prescribed by law in Kenya? **Yes/No**
11. Do you lend money on your account? **Yes/No**
12. Have you ever been declared bankrupt? **Yes/No**
13. Do you hold a political office? **Yes/No** If Yes, please specify
14. Are you a delegate from Nairobi County? **Yes/No** Kindly indicate branch
15. Do you Have sufficient time to attend to Asili SACCO business **Yes/No**
16. Have you attained deposits of KShs.500,000/= **Yes/No?** **Attach latest payslip**
17. Have your loans been delinquent? **Yes/No**

I declare that the above information is correct and I do understand that I can be charged for giving false information.

Applicant's Signature Date

Witness (Member) Name M/No. Signature.....

For Official Use:

Applicant's A/c Status Witness A/c Status

Verified by Signature: Date: