

Section 1: Particulars of Applicant (Nominee)

Given Names: Surname:

Date of Birth: Male: Female: Marital Status:

Member to a Super Fund or Savings & Loan Society?: Yes: No: Institute Name:

Member No.: Employment Status: Employed: Unemployed:

Employer Name:

Village: District: Province:

Mobile No.: Email Address:

Closest Living Relative (Complete Below):

Name of Relative:	Date of Birth:
Relation to Nominee:	Marital Status:
Employment Status:	Employer:
Employer Address:	Phone No.:
Mobile No.:	Email:

I confirm that I have fully understood the contents of this form that was read to me or written by me are true & correct in every particular.

Nominee/Applicant Signature: Dated:

Section 2: Particulars of Deceased

Member No.: Member Name:

Date of Birth: Payroll No.:

Attached to this application are: Medical Certificate of Death: Warrant to Bury: Letter from Pastor/Village Councillor/Priest:

Section 3: Beneficiary List & Method of Payment

Direct Deposit into Bank Account(s): Payment to PCO (where there is no beneficiaries):

Account Name	Account Number	Bank (BSB)	Branch	Bearer Signature

Section 4: Employer Declaration

I confirm that the information above is true & correct and no alterations were made or noted at the time of signing this form.

Name:

Designation:

Signature: Dated:

Employer Stamp Here: