NATIONAL BUREAU OF STATISTICS

(STAFF) MULTI-PURPOSE COOPERATIVE SOCIETY LIMITED

NEW MEMBER APPLICATION FORM

AFFIX A RECENT PASSPORT PHOTOGRAPH

MEMBERSHIP NO: ..... (FOR OFFICIAL USE)

NAME:. MR/MRS/MISS .....
SURNAME OTHER NAMES

SEX ..... **MARITAL STATUS** .....

DATE OF FIRST APPOINTMENT ..... **RETIREMENT DATE**.....

CURRENT POST ..... **GRADE/CONRAIS** ..... **STATE/LOCATION** .....

OFFICE FILE NO. ..... **IPPIS NO**. .....

STATE OF ORIGIN ..... **DATE OF BIRTH** .....

CONTACT ADDRESS .....

.....

TELEPHONE NUMBER(S) .....

E-MAIL ADDRESS (FUNCTIONAL) .....

PAY POINT - BANK ..... **ACCOUNT NUMBER** .....

HOW MUCH TO BE DEDUCTING AS YOUR SAVINGS .....

PLEASE PROVIDE TWO GUARANTORS (Must be member of the Society)

1. I MR/MRS/MISS ..... Rank ..... PLN .....

DEPARTMENT ..... DIVISION ..... LOCATION .....

PHONE NUMBER(S) ..... E-MAIL .....

2. I MR/MRS/MISS ..... Rank ..... PLN .....

DEPARTMENT ..... DIVISION ..... LOCATION .....

PHONE NUMBER(S) ..... E-MAIL .....

Hereby recommend that the applicant is well known, honest and trustworthy to the best of our knowledge. We guarantee his/her membership of the NBS (Staff) Multipurpose Cooperative Society.

DECLARATION BY THE MEMBER

I, ... do hereby declare that the undermentioned person(s) as my next of kin(s):

1. NAME..... RELATIONSHIP .....

ADDRESS .....

.

PHONE NUMBER(S) ..... E-MAIL .....

2. NAME..... RELATIONSHIP .....

ADDRESS .....

.

PHONE NUMBER(S) ..... E-MAIL .....

[This declaration made by member is revocable]

.....
Signature/Date

FOR OFFICIAL USE

....

PRESIDENT NAME, SIGNATURE & DATE **SECRETARY NAME, SIGNATURE & DATE**