



Dudu Regulated NWD T Sacco Society Limited (CS/ NO. 2672)

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BIO DATA FORM

(Complete this form in capital letters and return it to the office)

Requirements

APPLICANTS: ID/Passport; PIN certificate; Passport photo

NOMINEE/ CHILDREN DETAILS: ID/Passport/birth certificate if minor; Passport photo

SPOUSE DETAILS: Copy of marriage certificate or affidavit; Copy of spouse ID card.

PARENT DETAILS: Copy of parent ID (those alive)

1. Applicants Details

Member No.:

Mr Mrs Dr Ms Prof

Others

Surname name

Middle name

Other name

Payroll No

ID/Passport No

Nationality

Date of birth

Personal postal address

Postal code

Town

Mobile No

Personal email address

KRA pin

Gender

Marital Status

Employer

Work station

Designation

Terms of Service: Temporary Contract Permanent

2. Applicant's bank and mobile details

My registered bank/ M-pesa details

Mobile banking no (Safaricom):

Bankers:

Account No:

Branch:

3. Members Relations Details

SPOUSE DETAILS

Name of spouse	ID No.	Tel No.	Date married
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

MEMBER BIOLOGICAL PARENT'S DETAILS

No.	Name	Relationship	State whether Alive or Deceased	Permanent residence	Tel. Contact
1.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
2.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

PARENT'S INLAW DETAILS

No.	Name	Relationship	State whether Alive or Deceased	Permanent residence	Tel. Contact
1.					
2.					

CHILDREN DETAILS

No.	Name	Date of birth	Birth certificate/notification No
1.			
2.			
3.			
4.			
5			

PARTICULARS OF BENEFICIARY/NOMINEES

No.	Name	Relationship	Allocation (%)	Tel. Contact/Address	ID/ Birth Certificate Number
1.					
2.					
3.					
4.					
5					

NEXT OF KIN (TO BE CONTACTED INCASE OF AN EMERGENCY)

Name Relationship Tel

4. Declaration

Principal members signature Date

Witness name Id.No Signature Date

5. For official use only

Checked by: Signature Date

Approved by: Signature Date