



ATTACH  
PASSPORT  
PHOTO  
HERE

**P.O.BOX 10263 -00100, NAIROBI.**

**MICRO CREDIT MEMBERSHIP APPLICATION FORM**

SURNAME.....OTHER NAMES.....

DATE OF BIRTH.....ID.No.....

PLACE OF BUSINESS..... BUSINESS TYPE..... PERIOD OPERATED:.....

TERMS OF EMPLOYMENT IF EMPLOYED (permanent/Contract /Casual), P.O BOX.....

EMPLOYING INSTITUTION/COMPANY/PERSON.....

EMAIL ADDRESS.....BUSINESS PHYSICAL ADDRESS.....

RESIDENT AREA..... PERMANENT HOME  RENTED HOME

OFFICE TEL NO:..... MOBILE No.....

INTRODUCED TO KENVERSITY BY \_\_\_\_\_ M.NO. \_\_\_\_\_

**BENEFICIARY IN THE EVENT OF DEATH**

NAME:
ID NO:
ADDRESS:
CELL PHONE NO:
RELATIONSHIP:
(if more than one please ask for additional Beneficiary form)

**MONTHLY DEPOSIT CONTRIBUTION**

I .....hereby commit to contribute Ksh..... every month or any other financial benefit due to me and pay Kenversity Savings and Credit Co – operative Society Limited with effect from the month of ..... 20.....being my savings with the society until further notice in writing, signed by me.

Sign..... Date.....

Please attach two (2) color Passport Photographs, a copy of Appointment Letter if employed, three (3) copies of National Identity Card and Ksh.500/= Entrance fee, ksh.500 account opening, total Ksh.1000/-

**FOR OFFICIAL USE ONLY.**

1. KENSA ACCOUNT NUMBER

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2. MEMBER NUMBER.....MC: OFFICER.....