**KYAMBOGOUNIVERSITY**

***P.O BOX 1 KYAMBOGO***

**KYAMBOGO UNIVERSITY SAVING & CREDIT COOPERATIVE SOCIETY LIMITED**

**(KYUSACCO)**

***Certificate No: 7228***

**MEMBERSHIP APPLICATION FORM**

1. Name: ………………………………………………………………........
2. Gender (Tick where applicable)

 Male: Female: Date of Birth: ………………………….

1. Tel No: ……………………. Email Address: …………………………………
2. Faculty: ……………………………………………………………………………....
3. Department: ……………………….. Employment Title: …………..................
4. Next of Kin: ………………………………. Relationship: …………………………
5. Next of kin contact: ................................................
6. Employment terms and conditions (Tick where applicable).

 Permanent: Contract: Temporary:

1. Monthly Salary Deductions (savings): ……………
2. First date of execution (dd/mm/yy):........../........../..................
3. Minimum Share Capital: **100,000/=** Additional Share Capital: ………………..
4. Recommended by: ……………………………....... Signature…………………..
5. I agree to subscribe to KYUSACCO.

Signature: …………………. Date: …………………

***Thank you for choosing to be part of the KYUSACCO family***

**For official use only**

Application has been approved

Date: ……………… Signed: …………….

 Chairperson/Treasurer