

**CHANGE OF PERSONAL INFORMATION**

**A. MEMBER IDENTIFICATION**

Surname ..... First Name ..... Middle Name .....

PIN:.....

**B. INFORMATION TO BE CHANGED (Tick as appropriate)**

I wish to change the following information (tick as appropriate)

- Name     
  Address     
  Next of Kin  
 Marital Status     
  Telephone Numbers

**C. CHANGE OF PERSONAL DETAILS (Enter new Personal Details)**

Surname ..... First Name ..... Middle Name .....

Marital status:..... Telephone Numbers:.....

For change of Name, kindly attach evidence such as marriage certificate, newspaper announcement, e.t.c

**D. CHANGE OF ADDRESS (Enter new address)**

Number & Street:.....

L.G:.....

State:.....

Email Address:.....

**E. CHANGE OF NEXT OF KIN (Enter name of new next of kin)**

I wish to change my next of kin to:

	Relationship	% age share
1. Name in full.....	.....	.....
2. Name in full.....	.....	.....

**F. CERTIFICATION (To be completed by the Employee)**

I hereby certify that the new information provided above is true and correct to the best of my knowledge.

Please print within the lines

Signature & Date

Right Thumb Print

Left Thumb Print