



MEMBER BIO -DATA COLLECTION AND VALIDATION FORM (PROJECTS AND CONTRACT STAFF)

All Sections Marked (*) must be completed by a Member

Serial No: Full name:

Member Number /
(NIN / Refugee ID No. / Passport No.) *

Surname*
<input type="text"/>

First Name*
<input type="text"/>

Other Names
<input type="text"/>

Gender*
<input type="text"/>

Date of Birth*
<input type="text"/>

Marital Status
<input type="text"/>

Telephone*
<input type="text"/>

Alternative Telephone
<input type="text"/>

Email*
<input type="text"/>

Physical Address*
<input type="text"/>

Next of Kin: Name
<input type="text"/>

Next of Kin: Telephone Contact
<input type="text"/>

University College
<input type="text"/>

Project Name *
<input type="text"/>

Date of Appointment
<input type="text"/>

Date of Joining Scheme
<input type="text"/>

Duration of Project
<input type="text"/>

Designation
<input type="text"/>

I CONFIRM that the information provided on this form is correct and accurate.

Signature..... Date.....

**Attach a copy of your National ID

Section B: For Official use only

I-LIST OF CHANGES MADE AT DATA VALIDATION

S/n	Field	Provided by member	Changed to
1.	Member Number		
2.	NIN / Refugee ID No. / Passport No.		
3.	Surname		
4.	Other Names		
5.	Date of Birth		
6.	Date of Employment		
7.	Date of Joining Scheme		
8.	Email		
9.	Phone No.		
10.	File No.		
11.	University College		
12.	Project Name		

II-CONFIRMATIONS

Activity	Name	Signature	Date
Data Collected by:			
Confirmation that Date of Birth provided on form collated with that on National ID:			
Data entered into MIS system:			
First Check of data in the system by DCO:			
Confirmation Check of data in the system by PPO:			