

NATIONAL PENSION SCHEME AUTHORITY

MEMBER AMENDMENT FORM

IMPORTANT INSTRUCTIONS

- Ensure that you complete all the sections below.
- Email the completed form together with a copy of your NRC (both sides) to reg@napsa.co.zm

PART '	1
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PERSONAL DETAILS

		SOCIAL SECURITY NUMBER
N.R.C NO.		
TITLE	Sir Mr Lady	
SURNAME		
OTHER NAMES		
MAIDEN NAME		
SEX	(Write ' M ' for Male for ' F ' for Female) MARITAL STATUS	
	YYYY-MM-DD	
DATE OF BIRTH		Single Married Divorced
		Widow Widower Separate
MOBILE NUMBER		
E-MAIL		
TOWNSHIP /		
HEADMAN NAME		
STREET NAME		
HOUSE NO. /		
VILLAGE NAME		
DISTRICT		

DECLARATION

I DECLARE THAT THE INFORMATION SUBMITTED ABOVE IS CORRECT TO THE BEST OF MY KNOWLEDGE.

EMPLOYEE/MEMBER'S SIGNATURE

DATE

YYYY-MM-DD