



Boresha Vijana Empowerment Programme

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APPLICATION FORM

Category : (please tick one): Individual Group/Chamaa

A). PERSONAL DETAILS

Name (Full): _____ ID/Passport Number: _____

Age: _____ Date of Birth: _____ Gender: _____ Mobile Number: _____

Do you have an account with Boresha? Yes No ,If Yes provide Account number Here:

E-Mail Address: _____ Postal Address: _____ Marital: _____

Occupation/Skill/Career: _____ Present Job : _____ Previous Job: _____

Area of interest/Passion/Talent: _____

B). GROUP DETAILS

Group/Entity Name : _____ Registration NO: _____

Date of Registration: _____ Date of Commencing Business: _____ Mobile Number: _____

Do you have an account with Boresha? Yes No ,If Yes provide Account number Here:

E-Mail Address: _____ Postal Address: _____

Nature of Bussiness/Activity: _____ Industry/Sector : _____

C). GROUP MEMBERS

	Name	Position	ID Number	Age	D.O.B	Phone Number	Sacco A/C No:	E-Mail
1.								
2.								
3.								
4.								
5.								
6.								
7.								
8.								
9.								
10.								

Note: Groups with more than ten (10) members, attach an extra BVEP application form and fill SECTION C

D). FOR OFFICIAL USE:

	Name	Sign	Date
Received by:			
Confirmed by:			



BVEP 2019 powered by Boresha Community Foundation.

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COMMENTS:

How can the foundation through the SACCO empower the youths?.

