EMPLOYEE BIO DATA FORM

*To be filled by the employee in a different font colour, kindly note this information will handled with the maximum confidentiality.*

SECTION 1: Employee details

|  |  |
| --- | --- |
| FIRST NAME: | OTHERS: |
| MOBILE NUMBER: | Personal Email Address: |
| Start Date of Employment: | Job Title: |
| Department: | Type of job e.g (permanent,contract,consultant,Internship) |
| Date of birth: | Marital Status: |
| County of Origin: | Postal Address: |
| Residence: | Postal Address: |

|  |  |
| --- | --- |
| ID Number: | KRA Pin: |
| NHIF Number: | NSSF Number: |
| Bank Name and Branch: | Account Number: |

SECTION 2: Alternative Contact details:

|  |  |
| --- | --- |
| Next of Kin 1: | Next of Kin 2: |
| Relationship: | Relationship: |
| Mobile Number: | Mobile Number: |

*I........................................................................ CERTIFY THAT THE INFORMATION GIVEN ABOVE IS ACCURATE.*

*SIGNATURE..................................................................................................................*

*DATE.............................................................................................................................*