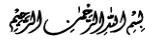




AHMADIYYA  
MUSLIM JAMA'AT  
Canada



# AHMADIYYA MUSLIM JAMA'AT CANADA

✉ 10610 Jane Street, Maple, ON L6A 3A2 ☎ (905) 832-2669 ext. 2243 📠 (905) 832-3220 📧 gs@ahmadiyya.ca

## REQUEST FOR APPOINTMENT OF AN OFFICE BEARER

Jama'at / Halqa Name (circle one)	Proposed Office	Total Tajnid [ ][ ][ ][ ]
Proposed Name	Home Phone	Chanda Paying Members [ ][ ][ ][ ]
Mobile Phone	E-mail	Member Code [ ][ ][ ][ ][ ]
Office currently vacant? <input type="checkbox"/> Yes <input type="checkbox"/> No (If no, state existing Secretary's name and reason for change)		
Ahmadi by birth <input type="checkbox"/> Yes <input type="checkbox"/> No (if No, then Date of Bai'at): DD MM YYYY [ ][ ][ ][ ][ ][ ][ ][ ][ ]		Age [ ][ ][ ]
Current Office(s) held	Past Office(s) held in Jama'at / Auxiliary Organizations	
Education	Vehicle <input type="checkbox"/> Yes <input type="checkbox"/> No	Musi <input type="checkbox"/> Yes <input type="checkbox"/> No
Beard <input type="checkbox"/> Yes <input type="checkbox"/> No (if no, state reason)	Chanda Report <input type="checkbox"/> Regular <input type="checkbox"/> Basharah <input type="checkbox"/> Other _____	
Family Background		
Ta'zir (Disciplinary Action) <input type="checkbox"/> Yes <input type="checkbox"/> No	Health & Mobility	Level of Religious Knowledge
Signature of Sadr Jama'at / Local Amir Jama'at & Sadr Halqa	Date DD MM YYYY [ ][ ][ ][ ][ ][ ][ ][ ][ ]	

OFFICE USE ONLY	
Umur 'Amma Report ..... .....	Mal Report ..... .....
Date Form Received:	Comments / Notes ..... ..... .....
Signature of National Amir Jama'at	
Date DD MM YYYY ▶ [ ][ ][ ][ ][ ][ ][ ][ ][ ]	

All questions must be answered. Incomplete form will not be processed. Please email completed form to gs@ahmadiyya.ca