



MEMBERSHIP APPLICATION CONFIRMATION LETTER

Employee Details

Employee Name: _____

NRC/ID Number: _____

Employee number: _____

Employer/Ministry Department : _____

Position/Title: _____

Date of Employment: _____

Employment Status - Fixed-Term or Permanent Contract: _____

Human Resource Authorised Representative

This confirmation must only be completed and signed by an authorized Human Resources representative in the employing Ministry or Institution. Senior teachers, accounting staff, supervisors, or other employees who are not authorized HR representatives should not sign this confirmation.

Name of Authorized HR Representative: _____

Designation: _____

Organization/ Ministry department: _____

Mobile Number: _____

Email Address: _____

Physical Address: _____

Signature: _____

Date: _____

Official Stamp: _____