

**REPUBLIC OF NAMIBIA
SOCIAL SECURITY COMMISSION
SOCIAL SECURITY ACT, 1994**

Form 3

**The Chief Executive Officer
Social Security Commission
Private Bag 13223
Windhoek**

(FOR OFFICIAL USE ONLY) REGISTRATION NUMBER:
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**APPLICATION FOR REGISTRATION AS AN EMPLOYEE
(Section 20/Regulation 2)
TO BE COMPLETED IN BLOCK LETTERS**

PARTICULARS OF EMPLOYEE:

1. Surname:
2. First names:
3. Date of Birth:..... 4. ID Number:(if any)
5. Passport Number:(if any)
6. Marital Status:

Married	
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Single	
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Male	
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Female	
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7. Address:
8. Residential Address:
9. Telephone Number: 11. Facsimile number:
12. Number of children: Male: Ages: Female: Ages :.....
13. Occupation:
14. Date of commencement of employment:
15. Monthly income:
16. If previously registered as an employee, state previous Social Security Registration Number:
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PARTICULARS OF EMPLOYER:

1. Employer's Social Security Registration Number:
2. Name:.....
3. Postal Address:.....
4. Telephone Number: 5. Fax Number:

I,.....(full names and capacity)
certify that the above particulars are true and correct.

.....
EMPLOYER

.....
DATE

FOR OFFICIAL USE ONLY	
Checked by:.....	Date:.....
Remarks:	
Fee Paid: N\$.....	Receipt Number: