



Certificate No.

DIASPORA LIFE CERTIFICATE

Tick Appropriate Box

Pension & Other Benefits Scheme

Accident Prevention & Worker's Compensation Scheme

Year 2023

NB: This life certificate must be completed in full and accompanied by a valid copy of your valid Passport and birth certificates for minor children. Failure to complete the Life Certificate within 3 Months will result in the suspension of the Pension payment which can be reinstated on receipt of the Life Certificate. Please note, submitting false information can render you liable to prosecution. Download, complete, scan and send via email address NssaLifeCertificates@nssa.org.zw

1. Details of Contributor/Worker

First Name..... Surname.....

National ID No..... SSN

Physical Address.....

Contact Address.....

Email Address..... Phone numbers (1)(2)

Marital Status: (Single/ Married/ Divorced/ Widowed)..... If Married Name of Spouse(s).....

Are you Currently Employed.....If Yes, Name and Address of Employer.....

I certify that I last received my pension on Month..... Year.....

Signature..... Date...../...../.....

2. To be completed by Widow/wer/Dependant/Parent

First Name..... Surname.....

National ID No..... SSN

Physical Address.....

Contact Address.....

Email Address..... Phone numbers (1)(2)

I have remarried and my present husband/wife isID No.....

Date of remarriage...../...../.....

I certify that I last received my pension on Month..... Year.....

Signature..... Date...../...../.....

NB: If you have not received your pension for more than 1 year; please attach a current Bank Statement

3. To be completed by Guardian/ Child

First Name..... Surname.....

National ID No..... SSN

Physical Address.....

Contact Address.....

Email.....Contact Numbers.....

I certify that the following children under my guardianship are still alive:

Child's Full Name	Date of Birth	Child ID Number	Name of School/ College being attended	School Contact details Physical Address, Phone numbers, email	Date when child left School/College	Is Child Disabled	Is Child Married

If space provided is not enough. Please use and attach a separate sheet of paper.

Signature..... Date...../...../.....

Thumb Print

NB: This portion to be certified by Zimbabwe Embassy official, Notary Public or Commissioner of Oaths of the Police of that respective country.

I.....certify that.....has signed the above in my presence and that to the best of my knowledge and belief, the information given is correct.

Signature.....

Designation.....

DATE STAMP

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