# DIASPORA LIFE CERTIFICATE

*Tick Appropriate Box*

**Pension & Other Benefits Scheme** ☐ **Accident Prevention & Worker's Compensation Scheme** ☐ **Year 2025**

***NB: This life certificate must be completed in full and accompanied by a valid certified copy of your Passport and birth certificates for minor children. Failure to complete the Life Certificate within 3 Months will result in the suspension of pension payment which; can only be reinstated on receipt of the Life Certificate. Please note, submitting false information can render you liable to prosecution. 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 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 |
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*If space provided is not enough. Please use and attach a separate sheet of paper.*

**Thumb Print**

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

**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.

**DATE STAMP**

**Signature**.....

**Designation**.....