** NASRUL-LAHI-L-FATIH SOCIETY (NASFAT)**

**NOMINATION FORM (SHUURA 1447 A.H. 2025)**

**PERSONAL BIO-DATA OF NOMINATOR**

NAME OF NOMINATOR:

BRANCH: NASFAT MEMBERSHIP NO.

CONTACT ADDRESS:

TELEPHONE NO: EMAIL:

FULL NAME OF NOMINEE:

POSITION:

BRIEFLY COMMENT ON RELATIONSHIP & CHARACTER OF NOMINEE:

**SIGNATURE: DATE:**



**Affix Passport Photograph**

FORM NO…………..

|  |  |  |  |
| --- | --- | --- | --- |
| H/Q | ZONE | BRANCH | INTERNATIONAL |

TICK ONE BOX AS APPROPRIATE

**NASRUL-LAHI-L-FATIH SOCIETY (NASFAT)**

**NASFAT SHUURA COMMITTEE SCREENING FORM 1447 A.H. (2025)**

***PLS FILL ALL APPLICABLE AREAS IN INK****. THE SUPPLIED INFORMATION WILL BE KEPT CONFIDENTIAL AND IS TO BE USED ONLY FOR THE PURPOSE OF SECURITY SCREENING*

**PERSONAL BIO-DATA**

|  |  |  |  |
| --- | --- | --- | --- |
| 1.1 FULL NAME (WITH TITLE(S) IF ANY) | | | |
| 1.2 DATE OF BIRTH | 1.3 PLACE OF BIRTH | 1.4 GENDER |  |
| 1.5 NATIONALITY | 1.6 STATE OF ORIGIN | 1.7 LOCAL GOVT OF ORIGIN |  |
| 1.8 NAME OF TOWN/VILLAGE | 1.9 COMPOUND’S NAME/STREET ADDRESS IN TOWN/VILLAGE | | |

CONTACT DETAILS

|  |  |
| --- | --- |
| 2.1 YOUR PERMANENT RESIDENTIAL ADDRESS | 2.2 YOUR CORRESPONDENCE ADDRESS IF DIFFERENT FROM 2.1 |
| 2.3 TELEPHONE. i | 2.4 TELEPHONE. ii |
| 2.5 EMAIL | |

POSITION NOMINATED FOR

|  |
| --- |
|  |

**N.B**

**- Attach CV (Resume)**

**-Referee to give opinion on the nominee (1 page)**

**- 1 Passport and 2 Postcard 4X4 Photographs**

**-Attach the photocopy of your credentials**

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**DETAILS OF MARITAL HISTORY (WITH OPTION FOR SPOUSES)**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **NAME OF SPOUSES (WITH TITTLE) IF ANY** | **YEAR MARRIED** | **OCCUPATION** | **NAME OF EMPLOYER** | **OFFICE ADDRESS** | **RESIDENTIAL ADDRESS** | **TELEPHONE NUMBER** |
|  |  |  |  |  |  |  |

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**PART B**

**EDUCATIONAL QUALIFICATIONS**

|  |  |  |
| --- | --- | --- |
| **SCHOOLS ATTENDED** | **YEAR (START/END)** | **QUALIFICATION** |
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**EMPLOYMENT HISTORY (3 MOST RECENT)**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **NAME OF EMPLOYER** | **OFFICE ADDRESS** | **YOUR LAST DESIGNATION/POST** | **YEAR** | **OFFICE PHONE NO.** | **OFFICE EMAIL ADDRESS** |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
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**MEMBERSHIP HISTORY**

|  |  |  |
| --- | --- | --- |
| **6.1 YEAR OF JOINING NASFAT** | **6.2 BRANCH** | **6.3 MEMBERSHIP NO.** |
| **6.4 MOST RECENT LEADERSHIP POSITIONS HELD/COMMITTEES SERVED** | | **6.5 YEAR (START/END)** |
|  | |  |
|  | |  |
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MEMBERSHIP OF OTHER SOCIAL/ISLAMIC ORGANISATION (IF ANY)

|  |  |  |  |
| --- | --- | --- | --- |
| **7.1 SOCIETY** | **7.2 TOWN** | **7.3 CONTACT ADDRESS** | **7.4 YEAR (START/END)** |
|  |  |  |  |
|  |  |  |  |
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**PART C**

**REFEREES**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **NAME** | **ADDRESS** | **OCCUPATION** | **PHONE** | **EMAIL** |
|  |  |  |  |  |
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|  |  |  |  |  |



**COMMENTS OF THE NASFAT MISSIONER (YOUR LOCATION**)

Name of the Branch Missioner:

Telephone No:

Comments & Signature:

**COMMENTS OF YOUR IMAM (OFFICE/RESIDENCE)**

Name of Imam:

Telephone No.

Comments & Signature:

**COMMENTS ON PERIOD OF SERVICE BY THE HQ / ZONAL / BRANCH**

**PART D**

**SECURITY CHECK**

D1. Have you ever been convicted of any crime?

D2. If yes, state the nature of the crime, the Police Station, Court and year of conviction

D3. Are you currently under investigation by any agency, commission of an administrative panel of enquiry?

D4. If yes, state brief facts of the matter \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

D5. Do you have Drug history as User or Courier/Baron?

D6. Money Laundering?

**CERTIFICATION**

**I…………………………………………………………………………..hereby certify that the information given about my person is true and devoid of any iota of falsehood**

**SIGNATURE DATE**

**Note: Please certify all the pages and ensure submission of form on or before (Date specify by Shurah Committee) to Shurah Committee.**

**FOR OFFICIAL USE**

**SECURITY SECRETARY DATE**