

Brief information of Founding Members of the Religious Institution- Form 13

1. Full name: _____

2. Sex Female [] Male []

3. Date of Birth: Day:____ Month:____ Year:_____

4. Nationality: _____

5. Marital Status: Married [] Unmarried []

6. Educational qualification: _____

7. Place of Birth:

Region: _____ City: _____ Zone/Town: _____

Woreda: _____ Kebele: _____ House No: _____

P.O. Box: _____ E-Mail: _____

Tel (normal): _____ Mobile: _____

8. Provisional name of the religious institution of founders: (see below)

German Speaking Evangelical Church in Ethiopia

9. Previous membership to a religious institution, if any:

Name (of rel. Institution): _____

Role (in religious institution): _____

Reason for departure: _____

Date of departure: _____

10. Address of place of work, if any:

Name (of work place): _____

Position held in the work: _____

Region: _____ City: _____ Zone/town: _____

P.O. Box: _____ E-Mail: _____

Tel (normal): _____ Mobile: _____

Confirmation:- I, the undersigning founding member of the religious institution hereby certify that the foregoing information provided is complete and true.

Full name: Mr / Mrs / Ms _____

Signature _____

Date: _____