GOVERNMENT NOTICES • GOEWERMENTSKENNISGEWINGS

DEPARTMENT OF LABOUR

NO. R. 1421 **04 NOVEMBER 2019**

DEPARTMENT OF EMPLOYMENT AND LABOUR

UNEMPLOYMENT INSURANCE ACT, 2001 (ACT NO. 63 OF 2001)

AMENDMENT OF UNEMPLOYMENT INSURANCE ACT REGULATIONS

The Minister of the Department of Employment and Labour has, in terms of section 54 of the Unemployment Insurance Act, 2001 (Act No. 63 of 2001), and after consultation with the Unemployment Insurance Board, made the regulations in the Schedule that will come into operation as follows:

Regulation 5A of the Amendment Regulations will come into operation on date of publication.

Regulations 5B and 6(f) of the Amendment Regulations will come into operation from 01 April 2020.

MR. T. W. NXESI, MP
MINISTER OF EMPLOYMENT AND LABOUR
DATE: 31/10/2019

SCHEDULE

Definition

1. In this Schedule "the Regulations" means the regulations published under Government Notice No. R. 400 of 28 March 2002 as amended by Government Notice No. 536 of 23 April 2004, Government Notice No. R. 823 of 10 August 2005, Government Notice No. R. 948 of 5 October 2009 and Government Notice No. R. 1434 of 28 December 2018.

Insertion of regulation 5A in the Regulations

2. The following regulation is hereby inserted after regulation 5 of the Regulations:
"**Application for parental benefits in terms of section 26B of the Act**

5A. (1) An application for parental benefits in terms of section 26B of the Act must be made at an employment office and must be in the form of a complete UI 2.9.

(2) An applicant for parental benefits, when making the application, must submit -

(a) an identity document;

(b) a full birth certificate of the child with full details of parents;

(c) a surrogate motherhood agreement in terms of the Children's Act, 2005 (Act No. 38 of 2005); or

(d) an interim court order placing the child in the care of the prospective adoptive parent pending the finalisation of an adoption order in respect of that child ;

(e) details of a valid bank account, in the form of UI 2.8; and

(f) remuneration received by the employee whilst still in employment, in the form of UI 2.7."

Insertion of regulation 5B in the Regulations

3. The following regulation is hereby inserted after regulation 5A of the Regulations:
"Application for commissioning parental benefit in terms of section 29B of the Act

5B (1) An application for commissioning parental benefits in terms of section 29B of the Act must be made at an employment office and must be in the form of a complete UI 2.9.

(2) An applicant for commissioning parental benefits, when making the application must submit -

(a) an identity document;

(b) a surrogate motherhood agreement in terms of the Children's Act, 2005 (Act No. 38 of 2005);

(c) details of a valid bank account in the form of UI 2.8;
(d) remuneration received by the employee whilst still in employment, in the form of UI 2.7; and
(e) birth certificate of the child with full details of parents."

Amendment of regulation 6 of the Regulations

4. Regulation 6 of the Regulations is hereby amended by the insertion of the following paragraph after paragraph (e) of sub-regulation (2):

"(f) interim court order placing the child in the care of the prospective adoptive parent pending the finalisation of an adoption order in respect of that child."

Amended forms

5. Forms 2.1; 2.2; 2.3; 2.4; 2.5; 2.6; 2.7; 2.8; 19 and 53 are hereby substituted for the evenly numbered forms in the Annexure.

New forms

6. Forms 2.1P; 2.2P; 2.3P; 2.4P; 2.9P; 2.12P; 2.9; and 2.12

Short title

7. These regulations are called the Unemployment Insurance Act Amendment Regulations, 2019 and shall come into operation as follows:

Regulation 5A of the Amendment Regulations will come into operation on date of publication

Regulations 5B and 6(f) of the Amendment Regulations will come into operation from 01 April 2020

UI-2.12P

UNEMPLOYMENT INSURANCE ACT 63 OF 2001 AS AMENDED
APPLICATION FOR PAYMENT OF COMMISSIONING PARENTAL BENEFITS
IN TERMS OF REGULATION 6(3)

Identity document

1. Surname:

2. Previous surname: *(Only if it changed since you current application)*

3. First names:

4. Contact Number

IN THE EVENT OF A CHANGE OF ADDRESS INDICATE YOUR NEW DETAILS

5. Postal address:

6. Residential address: *(If different from postal address)* Postal code

7. **If you have commenced work indicate date**: _____/_____/_____

➢ **NB IF YOUR BANKING DETAILS HAVE CHANGED FORM UI-2.8 MUST BE COMPLETED AND SUBMITTED**

I declare that :

I declare, except as stated in item 7, that I have not worked since the date of my application for Commissioning Parents benefits and have not been entitled to my normal remuneration/or will receive a portion of my normal remuneration as declared by my employer on prescribed form UI-2.7 submitted with my application form.

I furthermore declare that the information given is true and correct. I am aware that it is an offence to willfully make a false statement.
In the event of an overpayment occurring as a result of this application I undertake that I will refund the full amount to the Fund.

_____ _____
Signature of Applicant **Date**

NB!
- ➢ **THIS FORM MUST BE SUBMITTED TO YOUR NEAREST DEPARTMENT OF EMPLOYMENT AND LABOUR OFFICE.**
- ➢ **NO POST DATED FORMS WILL BE ACCEPTED OR PROCESSED.**
- ➢ **IN THE EVENT OF YOU RESUMING EMPLOYMENT OR BACK TO YOUR NORMAL WORKING HOURS, YOU ARE REQUIRED TO INFORM THE DEPARTMENT OF EMPLOYMENT AND LABOUR IMMEDIATELY AND TO REQUEST THE NEW/CURRENT EMPLOYER TO SUBMIT A DECLARATION.**

Date Received

UI-2.4P

UNEMPLOYMENT INSURANCE ACT 63 OF 2001 AS AMENDED
APPLICATION FOR PAYMENT OF ADOPTION BENEFITS
IN TERMS OF REGULATION 6(3)

Identity Document

1. Surname:

2. Previous surname: *(Only if it changed since your current applications)*

3. First names:

4. Contact Number

IN THE EVENT OF A CHANGE OF ADDRESS INDICATE YOUR NEW DETAILS

5. Postal address:

6. Residential address: *(If different from postal address)* Postal code

7. **If you have commenced work indicate date**: _____/_____/_____

➢ **NB IF YOUR BANKING DETAILS HAVE CHANGED FORM UI-2.8 MUST BE COMPLETED AND SUBMITTED**

I declare that :

I declare, except as stated in item 7, that I have not worked since the date of my application for adoption benefits and have not been entitled to my normal remuneration/or will receive a portion of my normal remuneration as declared by my employer on prescribed form UI-2.7 submitted with my application form.

I furthermore declare that the information given is true and correct. I am aware that it is an offence to willfully make a false statement.
In the event of an overpayment occurring as a result of this application I undertake that I will refund the full amount to the Fund.

_____ _____
Signature of Applicant **Date**

NB!
- ➢ **THIS FORM MUST BE SUBMITTED TO YOUR NEAREST DEPARTMENT OF EMPLOYMENT AND LABOUR OFFICE.**
- ➢ **NO POST DATED FORMS WILL BE ACCEPTED OR PROCESSED.**
- ➢ **IN THE EVENT OF YOU RESUMING EMPLOYMENT OR BACK TO YOUR NORMAL WORKING HOURS, YOU ARE REQUIRED TO INFORM THE DEPARTMENT OF EMPLOYMENT AND LABOUR IMMEDIATELY AND TO REQUEST THE NEW/CURRENT EMPLOYER TO SUBMIT A DECLARATION.**

Date Received

UI-2.7

UNEMPLOYMENT INSURANCE ACT 63 OF 2001 AS AMENDED
REMUNERATION RECEIVED BY THE EMPLOYEE WHILST STILL IN EMPLOYMENT

To: The Claims Officer

Statement in respect of payment made to the undermentioned Contributor who is still in my employment but is unable to work due to Illness; Maternity leave; Adoption Leave, Commissioning Parental leave, Parental leave or is on Reduced Working Time (RWT)

Full names of contributor: _____

Identity Document.													

Name of Employer: _____

Employers UIF Reference No. | | | | | | | | / | |

(A) In terms of section 5(1)b, 19(1), 24(2), 26A(1), 27(3) and 29A(1) of the abovementioned Act, I hereby certify that the contributor would receive less than 100% of his/her remuneration as from _____/_____/_____ (full date) due to:

Parental Leave		Commissioning Parental leave **(SURROGACY)**		Illness Leave		Maternity Leave		Adoption Leave		Reduced working time	

Periods during which different rates of remuneration were received while on leave/RWT (TO BE INDICATED IN CALANDER MONTHS)				**Gross remuneration received whilst on leave/RWT (Per month)**
From		To		
From		To		
From		To		
From		To		
From		To		
From		To		
From		To		
From		To		
From		To		

(B) The contributor is expected to/has resumed full working hours on _____/_____/_____.

_____

SIGNATURE OF EMPLOYER OR AUTHORISED AGENT

DATE:_____/ _____/_____

EMPLOYER STAMP
(if available)

UI-2.9P

UNEMPLOYMENT INSURANCE ACT 63 OF 2001 AS AMENDED

APPLICATION FOR PAYMENT OF PARENTAL BENEFITS

IN TERMS OF REGULATION 6(3)

Identity Document

1. Surname:

2. Previous surname: *(Only if it changed since submission of current claim)*

3. First names:

4. Contact number:

IN THE EVENT OF A CHANGE OF ADDRESS INDICATE YOUR NEW DETAILS

5. Postal address:

6. Residential address: *(If different from postal address)* Postal code

7. **(a) If you have commenced work indicate date**: _____/_____/_____

(b) Name of new employer: _____ **Employer Contact number**: _____

(c) If the Reduced Work Time period has come to an end indicate the date _____/_____/_____

- **NB IF YOUR BANKING DETAILS HAVE CHANGED FORM UI-2.8 MUST BE COMPLETED AND SUBMITTED**

I declare that :

- **I am unemployed and have not been employed since I last submitted my application completed a continuation form and that I have not received remuneration or payment in kind for any work performed without notifying the Claims Officer.**
- **I am on Reduced Work Time (*if applicable*)**
- **I am aware of the fact that it is an offence to complete this continuation form while I am in employment/ not on Reduced Work Time without informing the Claims Officer that I have resumed work.**
- **I furthermore declare that the information given is true and correct. I am aware that it is an offence to willfully make a false statement.**

_____ _____/_____/_____

Signature of applicant Date

NB!
- **THIS FORM MUST BE SUBMITTED TO YOUR NEAREST DEPARTMENT OF EMPLOYMENT AND LABOUR OFFICE.**
- **NO POST DATED FORMS WILL BE ACCEPTED OR PROCESSED.**
- **IN THE EVENT OF YOU RESUMING EMPLOYMENT OR BACK TO YOUR NORMAL WORKING HOURS YOU ARE REQUIRED TO INFORM THE DEPARTMENT OF EMPLOYMENT AND LABOUR OFFICES IMMEDIATELY AND TO REQUEST THE NEW/CURRENT EMPLOYER TO SUBMIT A DECLARATION (UI-19).**

Date Received:	

UI-53

NOMINATION FORM FOR UIF DEPENDANTS BENEFITS (PLEASE NOTE THAT NO ALTERATIONS ARE ACCETED ON THIS FORM)

I _____, Identity Document | | | | | | | | | | | | | |
(Employee's full name & surname)

Currently employed at _____ UIF Ref Number _____, hereby nominate the below individual(s) indicated to have access to my UIF Dependants Benefits in the event of my death.

1. **SPOUSE / LIFE PARTNER**

Surname	Full Names	Relationship to employee	Date of Birth	Identity Document

2. **CHILD/REN UNDER THE AGE OF 21 OR LEARNER OR DEPENDANT CHILD**

Surname	Full Names	Date of Birth	Identity Document

3. **NOMINATED BENEFICIARY OF YOUR CHOICE** ***(if more than 1 nominee, the percentage must be allocated per nominee)***

Surname	**Full Names**	**Date of birth**	**Valid ID/Passport/Permit Number**	**Relationship to employee**	**Allocated percentage**
Total Percentage					**100%**

I,_____the undersigned understand that my circumstances and those of the persons shown above as dependants and/or nominees may change. In the event there is a change, I undertake to complete and re-submit the form UI-53 to my Employer for submission to the Department of Employment & Labour.

Signed at: _____ on the _____

_____
EMPLOYEE'S SIGNATURE

_____ _____ _____
FULL NAME OF EMPLOYER REPRESENTATIVE *EMPLOYER'S SIGNATURE* *DATE*

- ***PLEASE NOTE THAT NO ALTERATIONS ARE ACCEPTED ON THIS FORM***

UNEMPLOYMENT INSURANCE ACT 63 OF 2001 AS AMENDED

UI-19

Employer's Declaration of Employees for the month of

Information to be supplied in terms of Section 56(1&3) read with Regulation 13(1&2)

An employer must by the seventh day of each month inform the Commissioner with all the information during the previous month regarding the employer's contact details or employees remuneration details including new appointments and termination of service. The employer must forward this form to the **Unemployment Insurance Fund** at (012) 337-1943/44 or 337-1580/81/82 **or submit same at any branch of the UIF which is closest to the employer. The completed form can also be faxed to any of the following numbers**: **Pta** (012) 309 5142/5286; **Jhb** (011) 497 3293; **Dbn** (031) 366 2156; **Polokwane** (015) 290 1670; **Mmabatho** (018) 384 2658; **East Ldn** (043) 701 3263; **Blftn** (051) 447 9353; **CT** (021) 441 8024;**Wtb** (013) 656 0233;**PE** (041) 506 5142;**Gmn** (011) 873 2219;**George** (044) 873 2568; **Pmb** (033) 394 5069. Or mail to: uif.declarations@labour.gov.za

1. EMPLOYER DETAILS

1.1 UIF Employer Reference No ☐☐☐☐☐☐☐ ☐ Branch No ☐☐☐☐☐☐ 1.2 PAYE Reference No (If registered with SARS) ☐☐☐☐☐☐☐☐☐☐

1.3 Trading name of business _____ 1.4 Physical Address _____

1.5 Address where employees listed in Item 2 work (if different to the address in 1.4) _____ 1.6 Postal address _____

1.7 Co. Reg.No (CIPRO No) ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐

1.8 E-mail address _____ 1.9 Fax No _____ 1.10 Phone No _____ 1.11 **Authorised person**** _____

2. EMPLOYEE DETAILS

A Surname	B Initials	C Identity Document Number	D* Total (Gross) Remuneration paid to Employee Per Month		E* Total Hours Worked during Month	F Commencement date of Employment						G Termination Date						H Reason for Termination (Use Termination Codes as supplied at the bottom of the page)	I Indicate whether contributor or non-contributor (YES OR NO)	J *** If non-Contributor state reason (Use codes at bottom of page)
			R	c		D	D	M	M	Y	Y	D	D	M	M	Y	Y			

I, _____ (Name of Employer), ID No _____, declare that the above information is true and correct. I understand that it is an offence to make a false statement.

EMPLOYER SIGNATURE _____ **DATE** _____

	DESCRIPTIONS
**	If the employer is not resident in the RSA, or is a body corporate not registered in the RSA, an authorised person must carry out the duties of the employer in terms of this Act.
D*	Remuneration means actual basic salary plus payment in kind (Declare actual gross salary)
	If paid Weekly, convert wages to monthly salary (weekly wages X 52/12)
E*	Total Hours Worked ie. Actual hours worked during the month
	Employers may also submit these details electronically from payrolls or on the UIF's website at www.labour.gov.za
*	Only Applicable for Commercial employers, Domestic employers – provide Surname and initials
****	Constructive dismissal can only be determined by the CCMA : Bargaining-Council or Labour Court

Code	(J) Reason for Non-Contribution ***
1	Temporary employees (less than 24 hours per month
2	Employees who earn commission only
3	No income paid for the payroll period

Employer Stamp
(if available)

REASON FOR TERMINATION CODES

2	Deceased	6	Resigned	10	Illness /Medically boarded	14	Business Closed	18	Commissioning Parental
3	Retired	7	Constructive Dismissal****	11	Retrenched/Staff Reduction	15	Death of Domestic Employer	19	Parental Leave
4	Dismissed	8	Insolvency/Liquidation	12	Transfer to another Branch	16	Voluntary Severance Package		
5	Contract Expired	9	Maternity/Adoption	13	Absconded	17	Reduced Work Time		

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UI-2.1

UNEMPLOYMENT INSURANCE ACT 63 OF 2001 AS AMENDED
APPLICATION FOR UNEMPLOYMENT BENEFITS IN TERMS OF SECTION 17(1) – Read with Regulation 3(1) and 12(1) B

Identity Document | **Date of Birth (dd/mm/yy)** | **Gender** Male ☐ Female ☐

First Names | **Surname**

Postal Address | **Code** | **Code /Telephone No.**

Residential Address | **Code** | **Cell No.**

Occupation | **E-Mail Address** | **Fax number**

Education

SPECIAL SCHOOL CERT.		GRADE 8-9		GRADE 12	
BELOW GRADE 8		GRADE 10 - 11		ABOVE GRADE 12	

Details of previous application if Identity Document differs to current.

a) Name and ID No under which you applied:

FURTHER REQUIREMENTS (NOT MANDATORY TO REDUCED WORK TIME)			ONLY APPLICABLE TO REDUCED WORK TIME APPLICANTS			IMPORTANT: READ THIS SECTION BELOW:
1. Are you registered as a workseeker with a Labour Centre established by the DOL?	*Yes*	*No*	1. Are you currently employed?	Yes	No	**I declare that I am / was unemployed/ I am working reduced hours from**
			2. Are / Were you on Reduced Work Time?	Yes	No	**_____ (indicate date).**
			3. Has your employer completed a UI-2.7?	Yes	No	**In the event of my application being successful, the Claims Officer will authorise the payment of benefits.**
2. Are you capable and available for work?	Yes	No				**I also undertake to inform the Claims Officer as soon as I am re-employed or receiving "full/normal pay" and understand that failure to do so will constitute fraud.**
3. If you are not capable of and available for work, please explain: _____						**In the event of an overpayment occurring as a result of any application I have submitted, I undertake that I will refund the full amount to the Fund.**

I declare that the above information is true and correct. SIGNATURE OF APPLICANT	SIGNATURE OF OFFICIAL		DEPARTMENT OF EMPLOYMENT AND LABOUR OFFICE STAMP
_____	_____	**Claim approved from** _____	
DATE: _____/_____/_____	**DATE:** _____/_____/_____	**Application refused in terms of** _____	
		Claims Officer (please print) _____	
		Signature _____ **Date** _____	

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UI-2.8

UNEMPLOYMENT INSURANCE ACT 63 OF 2001 AS AMENDED
AUTHORISATION TO PAY BENEFITS INTO BANKING ACCOUNT

To be completed by the Financial Institution (Bank/Post Office)

NB: No alterations should be made on this form

Name of account holder _____,
(Full name and surname in block letters)

Identity Document

Name of Financial Institution _____

Branch code

Account number

Indicate with an "X"

Savings account		**Current account**		**Transmission account**	

Dormant:		**Active**	

I declare that the abovementioned information is correct and complete in every aspect and that the Unemployment Insurance Commissioner will not be held liable for any incorrect payment which might arise due to incorrect/incomplete information supplied by me.

_____
Name of Bank / Post Office official

_____
Signature of Bank/ Post Office Official

Bank Stamp

Date: _____

To be completed by the Applicant

I, _____
(Full name and surname in block letters)

Identity Document

Hereby authorise the Unemployment Insurance Commissioner/Claims Officer to pay my benefits, if approved, into the abovementioned account held at the Financial Institution, unless otherwise instructed in writing.

I declare that the information as furnished by the abovementioned Financial Institution is to my knowledge accurate and complete. I indemnify the UIC of any liability in the event of payment being made into the provided banking account should this account be incorrect or incomplete.

_____
Signature of applicant

_____
Date

UI-2.12

UNEMPLOYMENT INSURANCE ACT 63 OF 2001 AS AMENDED

APPLICATION FOR COMISSIONING PARENTAL BENEFITS IN TERMS OF SECTION 26A (1), 27(3) and 29A (1) Read with Regulation 6(1)

Identity Number

Identity document of child

Date of Birth (dd/mm/yy)

Gender

Male | Female

First name

Surname

Postal Address

Code

Code /Telephone No

Residential Address

Code

Cell No

Occupation

E-Mail Address

Fax Number

Education

SPECIAL SCHOOL CERT.		**GRADE 8-9**		**GRADE 12**	
BELOW GRADE 8		**GRADE 10 - 11**		**ABOVE GRADE 12**	

Details of previous application if Identity document differs from current

a) Name and Identity document under which you applied:

ARE YOU STILL EMPLOYED *YES* *NO*

NB: IF YOU ARE STILL EMPLOYED, FORM UI 2.7 MUST ALSO BE COMPLETED.

IMPORTANT: READ THIS SECTION BELOW:

In the event of my application being successful, the Claims Officer will authorise the payment of benefits. I also undertake to inform the Claims Officer as soon as I am re-employed and understand that failure to do so will constitute fraud.

In the event of an overpayment as a result of any application I submitted, I undertake that I will refund the full amount to the Fund.

FOR OFFICIAL USE ONLY:

I declare that the above information is true and correct. SIGNATURE OF APPLICANT	SIGNATURE OF OFFICIAL	Claim approved from: _____ Application refused in terms of: _____ Claims officer (Please Print): _____ Signature: _____	Department of Employment and Labour Office Stamp
Date: _____/_____/_____	Date: _____/_____/_____	Date: _____/_____/_____	

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UI-2.1P

UNEMPLOYMENT INSURANCE ACT 63 OF 2001AS AMENDED

APPLICATION FOR PAYMENT OF UNEMPLOYMENT BENEFITS

IN TERMS OF SECTION 17(4) READ WITH REGULATION 3

Identity Document

1. Surname:

2. Previous surname: *(Only if it changed since submission of current claim)*

3. First names:

4. Contact number:

IN THE EVENT OF A CHANGE OF ADDRESS INDICATE YOUR NEW DETAILS

5. Postal address:

6. Residential address: *(If different from postal address)* Postal code

7. **(a) If you have commenced work indicate date**: _____/_____/_____

(b) Name of new employer: _____ **Employer Contact number**: _____

(c) If the Reduced Work Time period has come to an end indicate the date: _____/_____/_____

➢ **NB IF YOUR BANKING DETAILS HAVE CHANGED FORM UI-2.8 MUST BE COMPLETED AND SUBMITTED**

I declare that :

- **I am unemployed and have not been employed since I last submitted my application completed a continuation form and that I have not received remuneration or payment in kind for any work performed without notifying the Claims Officer.**
- **I am on Reduced Work Time (*if applicable*)**
- **I am aware of the fact that it is an offence to complete this continuation form while I am in employment/ not on Reduced Work Time without informing the Claims Officer that I have resumed work.**
- **I furthermore declare that the information given is true and correct. I am aware that it is an offence to willfully make a false statement.**

_____ _____/_____/_____

Signature of applicant Date

NB! ➢ **THIS FORM MUST BE SUBMITTED TO YOUR NEAREST DEPARTMENT OF EMPLOYMENT AND LABOUR OFFICE.**

➢ **NO POST DATED FORMS WILL BE ACCEPTED OR PROCESSED.**

➢ **IN THE EVENT OF YOU RESUMING EMPLOYMENT OR BACK TO YOUR NORMAL WORKING HOURS YOU ARE REQUIRED TO INFORM THE DEPARTMENT OF EMPLOYMENT AND LABOUR OFFICES IMMEDIATELY AND TO REQUEST THE NEW/CURRENT EMPLOYER TO SUBMIT A DECLARATION (UI-19).**

Date Received:	

UI-2.2

UNEMPLOYMENT INSURANCE ACT 63 OF 2001 AS AMENDED
APPLICATION FOR ILLNESS BENEFITS IN TERMS OF SECTION 22(1)

Identity Document

Date of Birth (dd/mm/yy)

Gender: Male ☐ Female ☐

First Names

Surname

Postal Address **Code**

Code /Telephone No

Residential Address **Code**

Cell No

Occupation

E-Mail Address

Fax Number

Education

SPECIAL SCHOOL CERT.		**GRADE 8-9**		**GRADE 12**	
BELOW GRADE 8		**GRADE 10 - 11**		**ABOVE GRADE 12**	

Details of previous application if Identity Document differs to current

a) Name and ID No under which you applied:

ARE YOU STILL EMPLOYED *YES* *NO*

NB: IF YOU ARE STILL EMPLOYED, FORM UI 2.7 MUST ALSO BE COMPLETED.

IMPORTANT: READ THIS SECTION BELOW:

In the event of my application being successful, the Claims Officer will authorise the payment of benefits. I also undertake to inform the Claims Officer as soon as I am re-employed and understand that failure to do so will constitute fraud.

In the event of an overpayment as a result of any application I submitted, I undertake that I will refund the full amount to the Fund.

MEDICAL CERTIFICATE (To be completed by a registered medical practitioner)

I, _____ am a qualified _____ Qualifications _____

My Registration number is _____. I confirm that _____

is suffering from _____(optional)

This patient was not capable of performing work from _____/_____/_____ to _____/_____/_____

Signature _____ **Date** _____

Tel No. _____ **Address** _____

Medical Practice Stamp (if available)

Where a Proxy was appointed by Doctor or Legal Representative proof must be attached.

FOR OFFICIAL USE ONLY:

I declare that the above information is true and correct. SIGNATURE OF APPLICANT	**SIGNATURE OF OFFICIAL**	**Claim approved from:** _____ **Application refused in terms of:** _____ **Claims officer (Please Print):** _____ **Signature:** _____	**Department of Employment and Labour Office Stamp**
Date: _____/_____/_____	**Date:** _____/_____/_____	**Date:** _____/_____/_____	

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UI-2.2P

UNEMPLOYMENT INSURANCE ACT 63 OF 2001 AS AMENDED
APPLICATION FOR PAYMENT OF ILLNESS BENEFITS
IN TERMS OF SECTION 22

Identity Document

1. Surname:

2. Previous surname: *(Only if it changed since the submission of your current application)*

3. First names:

4. Contact number:

IN THE EVENT OF A CHANGE OF ADDRESS INDICATE YOUR NEW DETAILS

5. Postal address:

6. Residential address: *(If different from postal address)* Postal code

7. Date returned to work: _____/_____/_____

I declare, except as stated in item 7, that I have not worked since the date of my application for illness benefits and have not been entitled to my normal remuneration/or will receive a portion of my normal remuneration as declared by my employer on prescribed form UI-2.7 submitted with my application form.

I furthermore declare that the information given is true and correct. I am aware that it is an offence to willfully make a false statement.

In the event of an overpayment occurring as a result of this application for payment I undertake that I will refund the full amount to the Fund.

_____ _____/_____/_____
Signature of applicant /Proxy Date

NB: IF YOUR BANKING DETAILS HAVE CHANGED, FORM UI-2.8 MUST BE COMPLETED

Where the forms are signed by a Proxy attach proof of appointment.

NB!
- **THIS FORM MUST BE SUBMITTED TO YOUR NEAREST DEPARTMENT OF EMPLOYMENT AND LABOUR OFFICE.**
- **NO POST DATED FORMS WILL BE ACCEPTED OR PROCESSED.**
- **IN THE EVENT OF YOU RESUMING EMPLOYMENT YOU ARE REQUIRED TO INFORM THE DEPARTMENT OF EMPLOYMENT AND LABOUR OFFICES IMMEDIATELY AND TO REQUEST THE NEW/CURRENT EMPLOYER TO SUBMIT A DECLARATION (UI-19).**

MEDICAL CERTIFICATE (To be completed by a registered medical practitioner.)

I, _____ am a qualified _____

qualifications _____. My registration number is _____.

I confirm that _____ is suffering from _____

This patient was not capable of performing work from _____ to _____

Signature: _____ Date: _____ Tel No. _____

Address _____

Date Received

Medical Practice Stamp (if available)

UI-2.3

UNEMPLOYMENT INSURANCE ACT 63 OF 2001 AS AMENDED
APPLICATION FOR MATERNITY BENEFITS IN TERMS OF SECTION 25(1)

Identity Document

Date of Birth (dd/mm/yy)

First Names

Surname

Postal Address

Code

Code /Telephone No

Residential Address

Code

Cell No

Occupation

E-Mail Address

Fax Number

Education

SPECIAL SCHOOL CERT.		**GRADE 8-9**		**GRADE 12**	
BELOW GRADE 8		**GRADE 10 - 11**		**ABOVE GRADE 12**	

Details of previous application if Identity Document differs to current.

a) Name and ID No under which you applied:

ARE YOU STILL EMPLOYED *YES* *NO*

NB: IF YOU ARE STILL EMPLOYED, FORM UI-2.7 MUST ALSO BE COMPLETED.

IMPORTANT: READ THIS SECTION BELOW:

In the event of my application being successful, the Claims Officer will authorise the payment of benefits. I also undertake to inform the Claims Officer as soon as I am re-employed and understand that failure to do so will constitute fraud.

In the event of an overpayment occurring as a result of any application I submitted, I undertake that I will refund the full amount to the Fund.

MEDICAL CERTIFICATE (to be completed by a registered medical practitioner or midwife)

I, _____ am a qualified _____ . Qualifications _____

My registration number is _____. I confirm that _____ is under my treatment and is pregnant. The expected due date of birth is _____.

OR

I confirm that _____ gave birth / stillborn / miscarriage on _____.

Signature _____ **Date** _____

Tel No. _____

Address _____

Medical Practice Stamp
(If available)

FOR OFFICIAL USE ONLY:

I declare that the above information is true and correct. SIGNATURE OF APPLICANT	**SIGNATURE OF OFFICIAL**	**Claim approved from:** _____ **Application refused in terms of:** _____ **Claims officer (Please Print):** _____ **Signature:** _____	**Department of Employment and Labour Office Stamp**
Date: _____/_____/_____	**Date:** _____/_____/_____	**Date:** _____/_____/_____	

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UI-2.3P

UNEMPLOYMENT INSURANCE ACT 63 OF 2001AS AMENDED
APPLICATION FOR PAYMENT OF MATERNITY BENEFITS
IN TERMS OF SECTION 25

Identity Document

1. Surname:
2. Previous surname: *(Only if it changed since the submission of your current application)*
3. First names:
4. Contact number:

IN THE EVENT OF A CHANGE OF ADDRESS INDICATE YOUR NEW DETAILS

5. Postal address:
6. Residential address: *(If different from postal address)* Postal code
7. *Date returned to work:* _____/_____/_____

8. DECLARATION:

I declare, except as stated in item 7, that I have not worked since the date of my application for maternity benefits and have not been entitled to my normal remuneration/or will receive a portion of my normal remuneration as declared by my employer on prescribed form UI-2.7 submitted with my application form.

I furthermore declare that the information given is true and correct. I am aware that it is an offence to willfully make a false statement. In the event of an overpayment occurring as a result of this application for payment I undertake that I will refund the full amount to the Fund.

_____ _____/_____/_____
Signature of applicant Date

NB: IF YOUR BANKING DETAILS HAVE CHANGED, FORM UI-2.8 MUST BE COMPLETED

NB!
- **THIS FORM MUST BE SUBMITTED TO YOUR NEAREST DEPARTMENT OF EMPLOYMENT AND LABOUR OFFICE.**
- **NO POST DATED FORMS WILL BE ACCEPTED OR PROCESSED.**
- **IN THE EVENT OF YOU RESUMING EMPLOYMENT YOU ARE REQUIRED TO INFORM THE DEPARTMENT OF EMPLOYMENT AND LABOUR OFFICES IMMEDIATELY AND TO REQUEST THE NEW/CURRENT EMPLOYER TO SUBMIT A DECLARATION (UI-19).**

Date Received

UI-2.4

UNEMPLOYMENT INSURANCE ACT 63 OF 2001 AS AMENDED

APPLICATION FOR ADOPTION BENEFITS IN TERMS OF SECTION 26A (1), 27(3) and 29A(1) Read with Regulation 6(1)

Identity document

Identity document of child

Date of Birth (dd/mm/yy)

Gender: Male ☐ Female ☐

First name

Surname

Postal Address

Code

Code /Telephone No

Residential Address

Code

Cell No

Occupation

E-Mail Address

Fax Number

Education

SPECIAL SCHOOL CERT.		**GRADE 8-9**		**GRADE 12**	
BELOW GRADE 8		**GRADE 10 - 11**		**ABOVE GRADE 12**	

Details of previous application if Identity Document differs from current

a) Name and Identity number under which you applied:

ARE YOU STILL EMPLOYED *YES* *NO*

NB: IF YOU ARE STILL EMPLOYED, FORM UI 2.7 MUST ALSO BE COMPLETED.

IMPORTANT: READ THIS SECTION BELOW:

In the event of my application being successful, the Claims Officer will authorise the payment of benefits. I also undertake to inform the Claims Officer as soon as I am re-employed and understand that failure to do so will constitute fraud.

In the event of an overpayment as a result of any application I submitted, I undertake that I will refund the full amount to the Fund.

FOR OFFICIAL USE ONLY:

I declare that the above information is true and correct. SIGNATURE OF APPLICANT	SIGNATURE OF OFFICIAL	Claim approved from: _____ Application refused in terms of: _____ Claims officer (Please Print): _____ Signature: _____	Department of Employment and Labour Office Stamp
Date: _____/_____/_____	Date: _____/_____/_____	Date: _____/_____/_____	

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UI-2.5

UNEMPLOYMENT INSURANCE ACT 63 OF 2001 AS AMENDED
APPLICATION FOR DEPENDANT'S BENEFITS BY SURVIVING SPOUSE OR LIFE PARTNER IN TERMS OF SECTION 30 Read with Regulation 7(1)

A. PARTICULARS OF DECEASED CONTRIBUTOR:

Identity Document | *Date of Birth (dd/mm/yy)* | *Gender* Male ☐ Female ☐

First Names | **Surname** | **Date of Death**

Last Residential Address | **Code**

Details of previous application if Identity Document differs to current

a) Name and ID/ passport No under which deceased applied:

B. PARTICULARS OF SURVIVING SPOUSE OR LIFE PARTNER

Identity Document | *Date of Birth (dd/mm/yy)* | *Gender* Male ☐ Female ☐

First Names | **Surname**

Postal Address | **Code** | **Tel No**

Residential Address | **Code** | **Cell No**

E-Mail Address

I declare that I am one of _____ surviving spouses or the only surviving spouse or life partner of the abovementioned deceased contributor, that I was not divorced from him/her and that information given in this document is true and correct.

In the event of an overpayment occurring as a result of this application, I undertake that I will refund the full amount to the Fund.

I understand that it is an offence to make a false statement.

FOR OFFICIAL USE ONLY:

I declare that the above information is true and correct. SIGNATURE OF APPLICANT Date: _____/_____/_____	SIGNATURE OF OFFICIAL Date: _____/_____/_____	Claim approved from: _____ Application refused in terms of: _____ Claims officer (Please Print): _____ Signature: _____ Date: _____/_____/_____	Department of Employment and Labour Office Stamp

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UI-2.6

UNEMPLOYMENT INSURANCE ACT 63 0F 2001 AS AMENDED
APPLICATION FOR DEPENDANT'S BENEFITS BY A GUARDIAN / DEPENDANT CHILD OR NOMINATED BENEFICIARY IN TERMS OF SECTION 30 READ WITH REGULATION 7(1) AND 7(2)

A. PARTICULARS OF DECEASED CONTRIBUTOR:

Identity Document | *Date of Birth (dd/mm/yy)* | *Gender* Male ☐ Female ☐

First Names | **Surname** | **Date of Death**

Last Residential Address | **Code**

Details of previous application if Identity Document differs from current

a) Name and Identity Document under which deceased applied:

B. PARTICULARS OF APPLICANT: **Guardian of a minor child** ☐ **Dependant child** ☐ **Nominated beneficiary** ☐

Identity Document | Date of Birth (dd/mm/yy) | Gender Male ☐ Female ☐

First Names | **Surname**

Postal Address | **Code** | **Tel No**

Residential Address | **Code** | **Cell No**

C. CHILD'S DETAILS:
First Names | **Surname**

Residential Address | **Code**

D.NOMINATED BENEFICIARY'S DETAILS:
First Names | **Surname**

Residential Address | **Code**

In the event of an overpayment occurring as a result of this application, I undertake that I will refund the full amount to the Fund.
I understand that it is an offence to make a false statement.

FOR OFFICIAL USE ONLY:

I declare that the above information is true and correct. SIGNATURE OF APPLICANT Date: _____/_____/_____	SIGNATURE OF OFFICIAL Date: _____/_____/_____	Claim approved from: _____ Application refused in terms of: _____ Claims officer (Please Print): _____ Signature: _____ Date: _____/_____/_____	Department of Employment and Labour Office Stamp

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UI-2.9

UNEMPLOYMENT INSURANCE ACT 63 OF 2001 AS AMENDED

APPLICATION FOR PARENTAL BENEFITS IN TERMS OF SECTION 26A (1), 27(3) and 29A (1) Read with Regulation 6(1)

PLEASE SELECT THE TYPE OF BENEFITS YOU WISH TO APPLY FOR:

Parental		Adoption		Commissioning Parental	

Identity Document | **Identity Document of child** | *Date of Birth (dd/mm/yy)* | *Gender*

Male		Female	

First name | **Surname**

Postal Address | **Code** | **Code /Telephone No**

Residential Address | **Code** | **Cell No**

Occupation | **E-Mail Address** | **Fax Number**

Education

SPECIAL SCHOOL CERT.		**GRADE 8-9**		**GRADE 12**	
BELOW GRADE 8		**GRADE 10 - 11**		**ABOVE GRADE 12**	

Details of previous application if Identity Document differs from current

a) Name and Identity Document under which you applied:

ARE YOU STILL EMPLOYED | *YES* | *NO*

NB: IF YOU ARE STILL EMPLOYED, FORM UI 2.7 MUST ALSO BE COMPLETED.

IMPORTANT: READ THIS SECTION BELOW:

In the event of my application being successful, the Claims Officer will authorise the payment of benefits. I also undertake to inform the Claims Officer as soon as I am re-employed and understand that failure to do so will constitute fraud.

In the event of an overpayment as a result of any application I submitted, I undertake that I will refund the full amount to the Fund.

FOR OFFICIAL USE ONLY:

I declare that the above information is true and correct. SIGNATURE OF APPLICANT Date: _____/_____/_____	SIGNATURE OF OFFICIAL Date: _____/_____/_____	Claim approved from: _____ Application refused in terms of: _____ Claims officer (Please Print): _____ Signature: _____ Date: _____/_____/_____	Department of Employment and Labour Office Stamp

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MUHASHO WA ZWA MISHUMO NA VHASHUMI

MULAYO WA NDINDAKHOMBO YA VHUSHAYAMUSHUMO WA, 2001 (MULAYO WA VHU. 63 WA 2001)

U KHWINISWA HA NDAULO DZA MULAYO WA NDINDAKHOMBO YA U SA SHUMA

Minisiṭa wa Muhasho wa zwa Mishumo na Vhashumi, nga fhasi ha tshiteṅwa tsha vhu 54 tsha mulayo wa Ndindakhombo ya Vhushayamushumo wa 2001 (Mulayo wa vhu 63 wa 2001) nga murahu ha ṋutangano na Bodo ya Ndindakhombo ya Vhushayamushumo, ndi sika Dzindaulo kha Sheduḷu dzine dza ḓo thoma u shuma nga ndila i tevhelaho:

Ndaulo 5A ya Dzindaulo dzo khwiniswaho ido thoma ushuma nga duvha ḷa nyandadzo

Ndaulo 5B na 6(f) ya Dzindaulo dzo khwiniswaho zwido thoma ushuma nga duvha ḷa 1 Lambamai 2020

MR. T. W. NXESI, MP
MINISIṬA WA ZWA MISHUMO NA VHASHUMI
DATUMU: 31/10/2019

SHEDUḼU

Ṭhalutshedzo

1. Kha shedulu iyi "Ndaulo" zwi amba ndaulo dzo anḓadzwaho nga fhasi ha Nḓivhadzo ya Muvhuso ya Vhu R. 400 ya ḽa 28 Ṭhafamuhwe 2002 sa zwo khwiniswaho nga Nḓivhadzo ya Muvhuso ya vhu 536 ya ḽa 23 Lambamai 2004, Nḓivhadzo ya muvhuso ya Vhu R. 823 ya ḽa 10 Ṭhangule 2005, Nḓivhadzo ya Muvhuso ya Vhu R. 948 ya ḽa 5 Tshimedzi 2009 na Nḓivhadzo ya Muvhuso ya Vhu R. 1434 ya ḽa 28 Nyendavhusiku 2018.

U dzheniswa ha ndaulo 5A kha Dzindaulo

2. Ndaulo i tevhelaho i khou dzheniswa nga murahu ha ndaulo 5 ya Dzindaulo:

"**Khumbelo ya mbuelo dza mubebi zwi tshi tevhedza tshiteṅwa** tsha vhu **26B tsha Mulayo**

5A. (1) Khumbelo ya mbuelo dza mubebi zwi tshi tevhedza tshiteṅwa tsha vhu 26B tsha Mulayo i tea u itwa kha ofisi ya zwa mishumo nahone i tea u vha i kha fomo yo ḓadzwaho ya UI 2.9.

(2) Muhumbeli wa mbuelo dza mubebi, musi a tshi khou ita khumbelo u tea u ṋetshedza -

(a) ḽiṅwalo ḽa vhuṋe;

(b) ṭhanziela ya mabebo yo fhelelaho ya ṅwana ine ya vha na zwidodombedzwa nga vhuḓalo zwa vhabebi;

(c) thendelano ya u vha mme wa mbebo nga thendelano (sarogeithi) zwi tshi tevhedza Mulayo wa Vhana wa 2005 (Mulayo wa vhu 38 wa 2005); kana

(d) ndaela ya khothe ya tshifhinganyana ine ya khou vhea ṅwana nga fhasi ha ndondolo ya mubebi ane a khou lavhelelwa u vha muunḓi hu tshe ho imelwa khunyeledzo ya ndaela ya u vha muunḓi wa ṅwana uyo;

(e) zwidodombedzwa zwa akhaunthu ya bannga zwa vhukuma, nga fomo ya UI 2.8; na

(f) mbuelo ine ya ṭanganedzwa nga mutholiwa musi a tshi khou shuma, nga fomo ya UI 2.7."

U dzheniswa ha ndaulo 5B kha dzindaulo

3. Ndaulo i tevhelaho i khou dzheniswa nga murahu ha 5A kha Dzindaulo:

"Khumbelo ya thendelo ya mbuelo dza mubebi zwi tshi tevhedza tshiteṅwa tsha 29B tsha Mulayo

5B (1) Khumbelo ya thendelo ya mbuelo dza mubebi zwi tshi tevhedza tshiteṅwa tsha 29B tsha Mulayo i tea u itwa kha ofisi ya zwa mishumo nahone i tea u vha kha fomo yo ḓadzwaho ya UI 2.9.

(2) Muhumbeli wa thendelo ya mbuelo dza mubebi, musi a tshi khou ita khumbelo u tea u ṋetshedza -

(a) ḷiṅwalo ḷa vhuṋe;

(b) thendelano ya u vha mme wa mbebo nga thendelano (serogeithi) zwi tshi tevhedza Mulayo wa Vhana wa 2005 (Mulayo wa vhu 38 wa 2005);

(c) zwidodombedzwa zwa akhaunthu ya bannga zwa vhukuma, nga fomo ya UI 2.8;

(d) mbuelo ine ya tanganedzwa nga mutholiwa musi a tshi khou shuma, nga fomo ya UI 2.7"; na

(e) ṭhanziela ya mabebo yo fhelelaho ya ṅwana ine ya vha na zwidodombedzwa nga vhuḓalo zwa vhabebi."

Khwiniso ya ndaulo 6 kha Dzindaulo

4. Ndaulo 6 kha dzindaulo i khou khwiniswa nga u dzhenisa phara i tevhelaho nga murahu ha phara (e) ya ndaulo ṭhukhu ya vhu (2):

"(f) ndaela ya khothe ya tshifhinganyana ine ya khou vhea ṅwana nga fhasi ha ndondolo ya mubebi ane a khou lavhelelwa u vha muuṋḓi hu tshe ho imelwa khunyeledzo ya ndaela ya u vha muuṋḓi wa ṅwana uyo." "

Fomo dzo khwiniswaho

5. Fomo 2.1; 2.2; 2.3; 2.4; 2.5; 2.6; 2.7; 2.8;19 na 53 dzi khou imelelwa nga fomo dza nomboro dzo sumbedzwaho kha Muengedzo.

Fomo ntswa

6. Fomo 2.1P; 2.2P; 2.3P; 2.4P; 2.9P; 2.12P; 2.9; na 2.12

Ṭhoho pfufhi

7. Ndaulo idzi dzi vhidzwa Ndaulo dza Khwiniso ya Mulayo wa Ndindakhombo ya Vhushayamushumo dza 2019 dzine dza ḓo thoma u shuma nga ndila i tevhelaho:

Ndaulo 5A ya Dzindaulo dzo khwiniswaho ido thoma ushuma nga duvha ḽa nyandadzo

Ndaulo 5B na 6(f) ya Dzindaulo dzo khwiniswaho zwido thoma ushuma nga duvha ḽa 1 Lambamai 2020

UI-2.2P

MULAYO WA NDINDAKHOMBO YA VHUSHAYAMUSHO WA VHU 63 WA 2001 SA ZWO KHWINISWAHO
KHUMBELO YA MBADELO DZA MBUELO DZA U LWALA
MBUELO DZA U LWALA ZWI TSHI TEVHEDZA TSHITEŃWA TSHA VHU 22

Ḷiṅwalo ḷa Vhuṋe

1. Tshifani:

2. Tshifani tsha kale: *(Arali tsho shanduka u bva tshe vha ṋetshedza khumbelo yavho ya zwenezwino)*

3. Madzina:

4. Nomboro ya Vhukwamani:

ARALI HA NGA VHA NA TSHANDUKO YA ḌIRESI KHA VHA SUMBEDZEA ZWIDODOMBEDZWA ZWAVHO ZWISWA

5. Ḍiresi ya Poswo:

6. Diresi ya Vhudzulo: *(Arali yo fhambana na ḍiresi ya poswo)* Khoudu ya Poswo

7. Datumu ya u humela mushumoni: _____/_____/_____

Ndi khou ana uri :

Ndi khou ana, nga nnda ha zwe zwa sumbedzwa kha tshiteṅwa tsha vhu 7, uri a thi athu u dovha nda shuma u bva ḓuvha ḷe nda ita ngalo khumbelo ya mbuelo dza u unḓa nahone ndo vha ndi sa khou wana muholo wo ḓoweleaho/kana u ṭanganedza tshipiḓa tsha muholo wanga wo ḓoweleaho sa zwo sumbedzwaho nga mutholi wanga kha fomo ya UI-2.7 yo ṋetshedzwaho khathihi na fomo yanga ya khumbelo.

Ndi dovha hafhu nda ana uri zwidodombedzwa zwo ṋetshedzwaho ndi zwa vhukuma. Ndi a zwi ḓivha uri ndi mulandu u ṋetshedza tshitatamennde tshi si tshavhukuma nga khole.

Arali ha nga badelwa masheleni o fhiraho zwo itwa nga khumbelo iyi ndi khou ḓikumedzela u humisela murahu masheleni oṯhe nga vhuḓalo kha Tshikwama.

_____ _____

Tsaino ya Muhumbeli Datumu

NB: ARALI ZWIDODOMBEDZWA ZWAVHO ZWA BANNGA ZWO SHANDUKA VHA TEA U ḌADZA NA U HUMISELA FOMO YA-2.8

Hune fomo dzo sainwa nga Muimeleli kha vha nambatedze vhuṭanzi ha u tiwa.

NB!

- **FOMO IYI I TEA U ṊETSHEDZWA KHA OFISI YA MUHASHO WA ZWA MISHUMO NA VHASHUMI YA TSINISA NAVHO.**
- **FOMO DZO NO FHIRELWAHO NGA TSHIFHINGA A DZI NGA ṮANGANEDZWI.**
- **ARALI VHO THOMA U SHUMA HAFHU KANA VHO VHUELELA KHA AWARA DZAVHO DZA U SHUMA DZO ḌOWELEAHO, VHA TEA U ḌIVHADZA MUHASHO ZWA VHASHUMI NA MUSHUMO NGA U ṮAVHANYA NA U HUMBELA MUTHOLI MUSWA U ṊETSHEDZA MUANO (UI-19).**

ṮHANZIELA YA ZWA DZILAFHO (Hu ḓadzwa nga mushumeli wa zwa mutakalo.)

Nṋe, _____ ndo phasa _____

ndalukano _____. Nomboro yanga ya u ḓiṅwalisa ndi _____.

Ndi khou khwaṯhisedza uri _____ o farwa nga _____

Mulwadze uyu o vha a sa koni u shuma u bva nga ḷa _____ u swika _____

Tsaino: _____ Datumu: _____ Nomboro ya Luṭingo _____

Ḍiresi _____

Datumu ya u Ṭanganedzwa

Tshiṯemmbe tsha vhupo ha Dzilafho (arali tshi hone)

MULAYO WA NDINDAKHOMBO YA VHUSHAYAMUSHUMO WA VHU 63 WA 2001 SA ZWO KHWINISWAHO **UI-19**

Muano waMutholiwa wa ṅwedzi wa

Zwidodombedzwa zwi tea u ṋetshedzwa zwi tshi tevhedza Tshiteṅwa 56(1&3) Tshi tshi vhalwa na Ndaulo 13(1&2)

Mutholi nga ḓuvhaḽa vhu sumbe ḽa ṅwedzi muṅwe na muṅwe u tea u ḓivhadza Khomishinari nga ha zwidodombedzwa zwoṱhe zwa ṅwedzi wo fhiraho maelana na zwidodombedzwa zwa vhukwamani zwa mutholi kana zwidodombedzwa zwa mbuelo dza mutholiwa zwi tshi katela u tholwa ha vhathu vhaswa na u fhela ha mushumo. Mutholi u tea u rumela iyi fomo kha **Tshikwama tsha Ndindakhombo ya Vhushayamushumo** kha (012) 337-1943/44 or 337-1580/81/82 **kana u i ṋetshedza kha davhi ḽiṅwe na ḽiṅwe ḽa UIF ḽine ḽa vha tsinisa na mutholi. Fomo yo ḓadzwaho i nga dovha ya tou fekisiwa kha nomboro dzi tevhelaho**: **Pta** (012) 309 5142/5286; **Jhb** (011) 497 3293; **Dbn** (031) 366 2156; **Polokwane** (015) 290 1670; **Mmabatho** (018) 384 2658; **East Ldn** (043) 701 3263; **Blftn** (051) 447 9353; **CT** (021) 441 8024;**Wtb** (013) 656 0233;**PE** (041) 506 5142;**Gmn** (011) 873 2219;**George** (044) 873 2568; **Pmb** (033) 394 5069. Or mail to: uif.declarations@labour.gov.za

1. ZWIDODOMBEDZWA ZWA MUTHOLI

1.1 Nomborondaula ya Mutholi ya UIF ☐☐☐☐☐☐☐ ☐ Nomboro ya Davhi ☐☐☐☐☐☐

1.2 Nomborondaula ya PAYE (arali vho ḓiṅwalisa na SARS) ☐☐☐☐☐☐☐☐☐☐

1.3 Dzina ḽa Bindu _____

1.4 Ḓiresi ya Vhupo _____

1.5 Ḓiresi ya hune vhashumi vho sumbedzwaho kha mutevhe kha Tshiteṅwa 2 vha shuma hone (arali dzo fhambana na ḓiresi ine ya vha kha 1.4)

_____

1.6 Ḓiresi ya Poswo _____

1.7 Nomboro ya u Ḓiṅwalisa ya Khamphani (CIPRO No) ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐

1.8 Ḓiresi ya Imeiḽi _____ 1.9 Nomboro ya Fekisi _____

1.10 Nomboro ya Luṱingo _____ 1.11 **Muthu ane a khou ṋea Thendelo**** _____

2. ZWIDODOMBEDZWA ZWA MUTHOLIWA

A Tshifani	B Thangela dzina	C Nomboro ya Ḽiṅwalo ḽa Vhuṋe	D* Ṱhanganyeloguṱe (Gross) Mbuelo dzo badelwaho kha Mutholiwa nga Ṅwedzi		E* Awaraguṱe dzo Shumiwaho kha Ṅwedzi	F Ḓuvhaḽa u Thoma u Shuma						G Ḓuvhaḽa u Fhela ha Mushumo						H Zwiitisi zwa u Fhela ha Mushumo (kha vha shumise Khoudu dza u Fhela ha Mushumo dzo sumbedzwaho magumoni a siaṱari)	I Kha vha sumbedze arali vha mubadeli kana vha si mubadeli (EE KANA HAI)	J *** Arali vha si mubadeli kha vha sumbedze tshiitisi (Kha vha shumise khoudu dzi re magumoni a siaṱari)
			R	c		D	D	M	M	Y	Y	D	D	M	M	Y	Y			

Nṋe, _____ (Dzina ḽa Mutholi), Nomboro ya ID _____, ndi khou ana uri zwidodombedzwa zwi re afho nṱha ndi zwa vhukuma. Ndi khou pfesesa uri ndi mulandu u ṋetshedza tshitatamennde tshi si tsha vhukuma.

TSAINO YA MUTHOLI _____ **DATUMU** _____

	Ṱhalutshedzo		Khoudu	(J) Zwiitisi zwa u sa Badela ***
**	Arali mutholi a si mudzuli kha ḽa RSA, kana hu tshiimiswa tshi songo ṅwaliswaho kha ḽa RSA, muthu o ṋewaho thendelo		1	Vhashumi vha tshifhinganyana (awara dza fhasi ha 24 nga ṅwedzi
	u tea u shuma mishumo ya mutholi zwi tshi tevhedza Mulayo uyu		2	Vhashumi vhane vha hola khomishini fhedzi
D*	Mbuelo zwi amba muholo wo ṱangana na mbadelo dza ndivhuwo (Kha vha sumbedze muhologuṱe)		3	A hu na mbuelo yo badelwaho kha tshifhinga tsha pheirolo
	Arali vha tshi badelwa nga Vhege, kha vha shandukise miholo i vhe muholo wa ṅwedzi (muholo wa vhege X 52/12)			
E*	Awaraguṱe dzo shumiwaho ie. Awara dzo shumiwaho kha ṅwedzi			
	Vhashumi vha tea u ṋetshedza zwidodombedzwa izwi nga kha elekiṱroniki zwi tshi bva kha mutevhe wa vhaholi/pheirolo kana webusaithi ya UIF kha www.labour.gov.za			
*	Zwi shuma fhedzi kha vhatholi vha Mbambadzo, Vhatholi vha vhashumi vha hayani –kha vha ṋetshedze Dzina na Thangeladzina			
****	U Kombetshedzwa u litsha mushumo zwi nga itwa fhedzi nga CCMA : Khoro ya Pfumedzano kana Khothe ya zwa Vhashumi			

Tshiṱemmbe tsha Mutholi
(arali tshi hone)

KHOUDU DZA ZWIITISI ZWA U FHELA HA MUSHUMO

2	Mufu	6	U ḓirula mushumo	10	Vhulwadze /u sa tsha kona u shuma	14	Bindu ḽo vala	18	Thendelo ya mubebi
3	U notha	7	U Kombetshedzwa u litsha mushumo****	11	Mushumo wo fhela/u fhungudzwa ha vhashumi	15	U lovha ha Mutholi wa hayani	19	ḽivi ya Mubebi
4	U pandelwa	8	U wa ha bindu/khamphani	12	U fhiriselwa kha ḽiṅwe Davhi	16	Vho dzhia phakhedzi nga u tou funa		
5	Konṱiraka yo fhela	9	Vhudzandze/u adoptha	13	U dzula mushumoni	17	Tshifhinga tsha u shuma tsho fhungudzwa		

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UI-2.1

MULAYO WA NDINDAKHOMBO YA VHUSHAYAMUSHUMO WA VHU 63 WA 2001 SA ZWO KHWINISWAHO

KHUMBELO YA MBUELO DZA VHUSHAYAMUSHUMO ZWI TSHI TEVHEDZA TSHITEŃWA TSHA VHU 17(1) – Tshi tshi Vhalwa na Ndaulo 3(1) na 12(1) B

Ḽiṅwalo ḽa Vhuṋe | **Datumu ya Mabebo (dd/mm/yy)** | **Mbeu** Munna / Mufumakadzi

Madzina | **Tshifani**

Ḓiresi ya Poswo | **Khoudu** | **Khoudu /Nomboro ya Luṱingo**

Diresi ya Vhudzulo | **Khoudu** | **Luṱingothendeleki**

Mushumo | **Ḓiresi ya Imeiḽi** | **Nomboro ya Fekisi**

Pfunzo

ṮHANZIELA YA TSHIKOLO TSHA TSHIPENTSHALA		**GIREIDI 8-9**		**GIREIDI 12**	
FHASI HA GIREIDI 8		**GIREIDI 10 - 11**		**NṮHA HA GIREIDI 12**	

Zwidodombedzwa zwa khumbelo yo fhiraho arali Ḽiṅwalo ḽa Vhuṋe ḽo fhambana na ḽa zwino.

a) Dzina na ID zwe vha ita khumbelo ngazwo:

DZIŃWE ṮHOḎEA (A ZWI KOMBETSHEDZWI KHA TSHIFHINGA TSHA MUSHUMO TSHO FHUNGUDZWAHO)	**ZWI SHUMA FHEDZI KHA VHAHUMBELI VHA TSHIFHINGA TSHA MUSHUMO TSHO FHUNGUDZWAHO**	**ZWA NDEME: KHA VHA VHALE TSHITEŃWA ITSHI TSHI RE AFHO FHASI:**
1. Vho ḓiṅwalisa sa muṱoḓi wa mushumo kha senthara ya zwa Mushumo yo thomiwaho nga DOL? ***Ee*** ***Hai***	1. Vha khou shuma? Ee Hai	**Ndi khou ana uri ndi khou/ndo vha ndi sa shumi/ ndi khou shuma awara dzo fhungudzwaho u bva nga ḽa**
2. Vha a kona u shuma nahone vho ḓiimisela u shuma? Ee Hai	2. Vha kha/vho vha vha kha Tshifhinga tsha Mushumo tsho Fhungudzwaho? Ee Hai	**_____ (kha vha sumbedze datumu).**
3. Arali vha sa koni u shuma na u ḓiimisela u shuma, Kha vha ṭalutshedze: _____	3. Mutholi wavho o ḓadza fomo ya UI-2.7? Ee Hai	**Arali khumbelo yanga ya tendelwa, Muofisiri wa Mbilo u ḓo tendela mbadelo dza mbuelo.**
		Ndi khou dovha nda ḓikumedzela uri ndi ḓo ḓivhadza Muofisiri wa Mbilo nga u tavhanya ndi tshi tou wana mushumo kana u ṱanganedza "muholo wo fhelelaho/wo ḓoweleaho" na u pfesea uri u kundelwa u ita izwo zwi dzhiiwa sa vhufhura.
		Arali ha nga vha na mbadelo dzo fhiraho zwo vhangwa nga khumbelo iṅwe na iṅwe ye nda ṋetshedza, ndi khou ḓikumedzela uri ndi ḓo humisa masheleni oṱhe nga vhuḓalo kha Tshikwama.

Ndi khou ana uri zwidodombedzwa zwi re afho nṱha ndi zwa vhukuma. **TSAINO NGA MUHUMBELI** _____ **DATUMU:** _____/_____/_____	**TSAINO NGA MUOFISIRI** _____ **DATUMU:** _____/_____/_____	**Mbilo yo tendelwa kha** _____ **Khumbelo yo hanelwa zwi tshi tevhedza** _____ **Muofisiri wa Mbilo (kha vha ṅwale nga vhuḓalo)** _____ **Tsaino** _____ **Datumu** _____	**TSHIṮEMMBE TSHA OFISI YA ZWA MISHUMO NA VHASHUMI**

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UI-2.12

MULAYO WA NDINDAKHOMBO YA VHUSHAYAMUSHUMO WA VHU 63 WA 2001 SA ZWO KHWINISWAHO

KHUMBELO YA THENDELO YA MBUELO DZA MUBEBI ZWI TSHI TEVHEDZA TSHITEŃWA TSHA 26A (1), 27(3) na 29A (1) Tshi tshi khou vhalwa na Ndaulo 6(1)

Nomboro ya Vhuṋe | **Ḷiṅwalo ḷa Vhuṋe ḷa ṅwana** | *Datumu ya Mabebo (dd/mm/yy)* | *Mbeu* Munna ☐ Mufumakadzi ☐

Dzina | **Tshifani**

Ḍiresi ya Poswo | **Khoudu** | **Khoudu /Nomboro ya luṱingo**

Ḍiresi ya vhudzulo | **Khoudu** | **Nomboro ya luṱingothendeleki**

Mushumo | **Ḍiresi ya Imeiḷi** | **Nomboro ya fekisi**

Pfunzo

ṮHANZIELA YA TSHIKOLO TSHA TSHIPESHALA.		**GIREIDI 8-9**		**GIREIDI 12**	
FHASI HA GIREIDI 8		**GIREIDI 10 - 11**		**NṮHA HA GIREIDI 12**	

Zwidodombedzwa zwa khumbelo yo fhiraho arali ḷiṅwalo ḷa vhuṋe ḷo fhambana na ḷa zwino

a) Dzina na ḷiṅwalo ḷa vhuṋe ḷe vha ita khumbelo ngaḷo:

VHA KHA ḌI SHUMA | *EE* | *HAI*

NB: ARALI VHA TSHI KHA ḌI SHUMA, HU TEA U ḌADZWA FOMO YA UI 2.7.

ZWA NDEME: KHA VHA VHALE TSHITEŃWA ITSHI AFHO FHASI:

Arali khumbelo ya nga tendelwa, Muofisiri wa Mbilo u ḓo tendela mbadelo dza mbuelo. Ndi khou dovha nda dzhia vhuḓifhinduleli ha u ḓo ḓivhadza Muofisiri wa Mbilo nga u ṱavhanya ndi tshi tou wana muṅwe mushumo na u pfesesa uri u kundelwa u ita ngauralo zwi ḓo vha hu vhufhura.

Arali ha nga itwa mbadelo dzo fhiraho zwo vhangwa nga khumbelo iṅwe na iṅwe yo ṋetshedzwaho, ndi khou fulufhedzisa uri ndi ḓo humisela murahu masheleni nga vhuḓalo kha Tshikwama.

Ndi khou ana uri zwidodombedzwa zwi re afho nṱha ndi zwa vhukuma. **TSAINO NGA MUHUMBELI** _____ **DATUMU:** _____/_____/_____	**TSAINO NGA MUOFISIRI** _____ **DATUMU:** _____/_____/_____	**Mbilo yo tendelwa kha** _____ **Khumbelo yo hanelwa zwi tshi tevhedza** _____ **Muofisiri wa Mbilo (kha vha ṅwale nga vhuḓalo)** _____ **Tsaino** _____ **Datumu** _____	**TSHIṮEMMBE TSHA OFISI YA ZWA MISHUMO NA VHASHUMI**

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UI-2.12P

MULAYO WA NDINDAKHOMBO YA VHUSHAYAMUSHUMO WA VHU 63 WA 2001 SA ZWO KHWINISWAHO
KHUMBELO YA MBUELO YA THENDELO YA MUBEBI ZWI TSHI TEVHEDZA NDAULO YA VHU 6(3)

Ḷiṅwalo ḷa Vhuṋe

1. Tshifani:

2. Tshifani tsha kale: *(Arali tsho shanduka u bva tshe vha ita khumbelo ya zwenezwino)*

3. Tshifani:

4. Nomboro ya Vhukwanani

ARALI HO VHA NA TSHANDUKO YA ḌIRESI KHA VHA SUMBEDZE ZWIDODOMBEDZWA ZWISWA

5. Ḍiresi ya poswo:

6. Ḍirsi ya vhudzulo: *(Arali i sa fani na ḍiresi ya poswo)* Khoudu ya poswo

7. **Arali vho thoma mushumo kha vha sumbedze datumu**: _____/_____/_____

➢ **NB! ARALI ZWIDODOMBEDZWA ZWAVHO ZWA BANNGA ZWO SHANDUKA VHA TEA U ḌADZA NA U HUMISELA FOMO YA-2.8**

Ndi khou ana uri :

Ndi khou ana, nga nnda ha zwe zwa sumbedzwa kha tshiteṅwa tsha vhu 7, uri a thi athu u dovha nda shuma u bva ḍuvha ḷe nda ita ngalo khumbelo ya mbuelo dza thendeloya mbuelo dza mubebi nahone ndo vha ndi sa khou wana muholo wo ḍoweleaho/kana u ṭanganedza tshipiḍa tsha muhoho wanga wo ḍoweleaho sa zwo sumbedzwaho nga mutholi wanga kha fomo ya UI-2.7 yo ṋetshedzwaho khathihi na fomo yanga ya khumbelo.

Ndi dovha hafhu nda ana uri zwidodombedzwa zwo ṋetshedzwaho ndi zwa vhukuma. Ndi a zwi ḍivha uri ndi mulandu u ṋetshedza tshitatamennde tshi si tsha vhukuma nga khole.

Arali ha nga badelwa masheleni o fhiraho zwo itwa nga khumbelo iyi ndi khou ḍikumedzela u humisela murahu masheleni oṱhe nga vhuḍalo kha Tshikwama

_____ _____

Tsaino ya Muhumbeli **Datumu**

NB!
- **FOMO IYI I TEA U ṆETSHEDZWA KHA OFISI YA MUHASHO WA ZWA MISHUMO NA VHASHUMI YA TSINISA NAVHO.**
- **FOMO DZO NO FHIRELWAHO NGA TSHIFHINGA A DZI NGA ṬANGANEDZWI.**
- **ARALI VHO THOMA U SHUMA HAFHU KANA VHO VHUELELA KHA AWARA DZAVHO DZA U SHUMA DZO ḌOWELEAHO, VHA TEA U ḌIVHADZA MUHASHO ZWA VHASHUMI NA MUSHUMO NGA U ṬAVHANYA NA U HUMBELA MUTHOLI MUSWA U ṆETSHEDZA MUANO.**

Datumu ya u Ṭanganedzwa

UI-2.1P

MULAYO WA NDINDAKHOMBO YA VHUSHAYAMUSHO WA VHU 63 WA 2001 SA ZWO KHWINISWAHO KHUMBELO YA MBADELO DZA VHUSHAYAMISHUMO

ZWI TSHI TEVHEDZA TSHIPIḌA TSHA VHU 17(4) TSHI TSHI VHALWA NA NDAULO YA VHU 3

Ḷiṅwalo ḷa Vhuṋe

1. Tshifani:

2. Dzina ḷa kale: *(Arali ḷo shanduka u bva tshe ha ṋetshedzwa mbilo ya zwenezwino)*

3. Madzina:

4. Nomboro ya Vhukwamani:

ARALI ḌIRESI YO SHANDUKA KHA VHA SUMBEDZE ZWIDODOMBEDZWA ZWISWA

5. Ḍiresi ya Poswo:

6. Ḍiresi ya Vhudzulo: *(Arali yo fhambana na ḍiresi ya poswo)* Khoudu ya Poswo

7. **(a) Arali vho thoma mushumo kha vha sumbedze datumu**: _____/_____/_____

(b) Dzina ḷa mutholi muswa: _____ **Nomboro ya Vhukwamani ya Mutholi**: _____

(c) Arali Tshifhinga tsha Mushumo tsho Fhungudzwaho tsho fhela kha vha sumbedze datumu: _____/_____/_____

- **ARALI ZWIDODOMBEDZWA ZWAVHO ZWA BANNGA ZWO SHANDUKA VHA TEA U ḌADZA NA U HUMISELA FOMO YA-2.8**

Ndi khou ana uri :

- **A thi shumi nahone ndo vha ndi sa khou shuma u bva tshe nda ṋetshedza khumbelo yanga/ u dadza fomo ya u bvelaphanḓa nahone a thi athu u ṱanganedza mbuelo kana mbadelo ya ndivhuwo kha mushumo muṅwe na muṅwe we nda u shuma ndi songo ḓivhadza Muofisiri wa Mbilo.**
- **Ndi khou shuma tshifhinga tsho Fhungudzwaho (*arali zwo tou ralo*)**
- **Ndi a zwi ḓivha uri ndi mulandu u ḓadza fomo iyi ya mvelaphanḓa ndi tshi khou shuma/ ndi si ho Tshifhinga tsho Fhungudzwaho ndi songo ḓivhadza Muofisiri wa Mbilo uri ndo vhuelela mushumoni.**
- **Ndi khou dovha nda ana uri zwidodombedzwa zwo ṋetshedzwaho ndi zwa vhukuma. Ndi a zwi ḓivha uri ndi mulandu u ṋetshedza tshitatamennde tsha mazwifhi nga khole.**

_____ _____/_____/_____

Tsaino nga muhumbeli Datumu

NB!

- **FOMO IYI I TEA U ṊETSHEDZWA KHA OFISI YA MUHASHO WA ZWA MISHUMO NA VHASHUMI YA TSINISA NAVHO.**
- **FOMO DZO NO FHIRELWAHO NGA TSHIFHINGA A DZI NGA ṰANGANEDZWI.**
- **ARALI VHO THOMA U SHUMA HAFHU KANA VHO VHUELELA KHA AWARA DZAVHO DZA U SHUMA DZO ḌOWELEAHO, VHA TEA U ḌIVHADZA MUHASHO ZWA VHASHUMI NA MUSHUMO NGA U ṰAVHANYA NA U HUMBELA MUTHOLI MUSWA U ṊETSHEDZA MUANO (UI-19).**

Datumu ya u Ṱanganedzwa:	

UI-2.2

MULAYO WA NDINDAKHOMBO YA VHUSHAYAMUSHUMO WA VHU 63 WA 2001 SA ZWO KHWINISWAHO
KHUMBELO YA MBUELO DZA U LWALA ZWI TSHI TEVHEDZA TSHITEŃWA TSHA VHU 22(1)

Ḽiṅwalo ḽa vhuṋe | Datumu ya mabebo (dd/mm/yy) | Mbeu: Munna ☐ Mufumakadzi ☐

Madzina | **Tshifani**

ḓiresi ya Poswo | **Khoudu** | **Khoudu /Nomboro ya Luṱingo**

Ḓiresi ya Vhudzulo | **Khoudu** | **Nomboro ya Luṱingothendeleki**

Mushumo | **Ḓiresi ya ImeiḽiNomboro ya Fekisi**

Pfunzo

ṮHANZIELA YA TSHIKOLO TSHA TSHIPENTSHALA.		**GIREIDI 8-9**		**GIREIDI 12**	
FHASI HA GIREIDI 8		**GIREIDI 10 - 11**		**NṮHA HA GIREIDI 12**	

Zwidodombedzwa zwa khumbelo yo fhiraho arali Ḽiṅwalo ḽa Vhuṋe ḽo fhambana na ḽa zwino

a) Dzina na ID ye vha ita khumbelo ngazwo:

VHA KHA ḒI SHUMA | ***EE*** | ***HAI***

NB: ARALI VHA TSHI KHA ḒI SHUMA, FOMO YA UI 2.7 I TEA U ḒADZWA.

ZWA NDEME: KHA VHA VHALE TSHITEŃWA ITSHI AFHO FHASI:

Arali khumbelo ya nga tendelwa, Muofisiri wa Mbilo u ḓo tendela mbadelo dza mbuelo. Ndi khou dovha nda dzhia vhuḓifhinduleli ha u ḓo ḓivhadza Muofisiri wa Mbilo nga u ṱavhanya ndi tshi tou wana muṅwe mushumo na u pfesesa uri u kundelwa u ita ngauralo zwi ḓo vha hu vhufhura.

Arali ha nga itwa mbadelo dzo fhiraho zwo vhangwa nga khumbelo iṅwe na iṅwe yo ṋetshedzwaho, ndi khou fulufhedzisa uri ndi ḓo humisela murahu masheleni oṱhe nga vhuḓalo kha Tshikwama.

ṮHANZIELA YA DZILAFHO (Hu dadzwa nga mushumeli wa zwa mutakalo)

Nṋe, _____ ndo phasa _____ Ndalukano _____

Nomboro yanga ya u ḓiṅwalisa ndi _____. Ndi khou khwaṱhisedza uri_____ o farwa nga _____(vha tou nanga)

Mulwadze uyu o vha a sa koni u shuma u bva nga ḽa _____/_____/_____ u swika ḽa _____/_____/_____

Tsaino _____ **Datumu** _____

Nomboro ya Luṱingo. _____ **Ḓiresi** _____

Tshiṱemmbe tsha Vhupo ha Dzilafho
(arali tshi hone)

Arali ho vha ho nangiwa muimeleli nga Dokotela kana Muimeleli wa zwa Mulayo hu tea u ṋambatedzwa vhutanzi.

Ndi khou ana uri zwidodombedzwa zwi re afho nṱha ndi zwa vhukuma.

TSAINO NGA MUHUMBELI

_____

DATUMU: _____/_____/_____

TSAINO NGA MUOFISIRI

_____

DATUMU: _____/_____/_____

Mbilo yo tendelwa kha _____

Khumbelo yo hanelwa zwi tshi tevhedza _____

Muofisiri wa Mbilo (kha vha ṅwale nga vhuḓalo)

_____

Tsaino _____

Datumu _____

TSHIṮEMMBE TSHA OFISI YA ZWA MISHUMO NA VHASHUMI

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UI-2.3

MULAYO WA NDINDAKHOMBO YA VHUSHAYAMUSHUMO WA VHU 63 WA 2001 SA ZWO KHWINISWAHO
KHUMBELO YA MBUELO YA ḼIVI YA VHUDZADZE ZWI TSHI TEVHEDZA TSHITEŃWA TSHA VHU 25(1)

Ḽiṅwalo ḽa Vhuṋe | **Datumu ya mabebo (dd/mm/yy)**

Madzina | **Tshifani**

Ḍiresi ya Poswo | **Khoudu** | **Khoudu /Nomboro ya Luṱingo**

Ḍiresi ya Vhudzulo | **Khoudu** | **Nomboro ya Lutingothendeleki**

Mushumo | **Ḍiresi ya imeiḽi** | **Nomboro ya Fekisi**

Pfunzo

ṮHANZIELA YA TSHIKOLO TSHA TSHIPENTSHALA		**GIREIDI 8-9**		**GIREIDI 12**	
FHASI YA GIREIDI 8		**GIREIDI 10 - 11**		**NṮHA HA GIREIDI 12**	

Zwidodombedzwa zwa khumbelo yo fhiraho arali Ḽiṅwalo ḽa vhuṋe ḽo fhambana na ḽa zwino.

a) Dzina na nomboro ya ID zwe vha ita khumbelo nga fhasi hazwo:

VHA KHOU SHUMA | ***EE*** | ***HAI***

NB: ARALI VHA TSHI KHA ḌI SHUMA, FOMO YA UI-2.7 I TEA U ḌADZWA.

ZWA NDEME: KHA VHA VHALE TSHITEŃWA ITSHI AFHO FHASI:

Arali khumbelo ya nga tendelwa, Muofisiri wa Mbilo u ḓo tendela mbadelo dza mbuelo. Ndi khou dovha nda dzhia vhuḓifhinduleli ha u ḓo ḓivhadza Muofisiri wa Mbilo nga u ṱavhanya ndi tshi tou wana muṅwe mushumo na u pfesesa uri u kundelwa u ita ngauralo zwi ḓo vha hu vhufhura.

Arali ha nga itwa mbadelo dzo fhiraho zwo vhangwa nga khumbelo iṅwe na iṅwe yo ṋetshedzwaho, ndi khou fulufhedzisa uri ndi ḓo humisela murahu masheleni oṱhe nga vhuḓalo kha Tshikwama

ṮHANZIELA YA ZWA DZILAFHO (I tea u ḓadzwa nga mushumeli wa zwa mutakalo kana mubebisi o ḓiṅwalisaho)

Nṋe, _____ndo phasa _____ . Ndalukano_____

Nomboro yanga ya u ḓiṅwalisa ndi _____. Ndi khou khwaṱhisedza uri_____ ndi khou u mu lafha nahone o ḓihwala

Datumu ine a khou lavhelelwa uri u ḓo vhofholowa ngayo ndi _____.

KANA

Ndi khou khwaṱhisedza uri _____ o vhofholowa /o wana ṅwana o lovhaho / o tshinyalelwa nga la _____.

Tsaino _____ **Datumu** _____

Nomboro ya luṱingo. _____

Ḍiresi _____

Tshiṱemmbe tsha Vhupo ha Dzilafho
(Arali tshi hone)

Ndi khou ana uri zwidodombedzwa zwi re afho nṱha ndi zwa vhukuma.

TSAINO NGA MUHUMBELI

_____

DATUMU: _____/_____/_____

TSAINO NGA MUOFISIRI

_____

DATUMU: _____/_____/_____

Mbilo yo tendelwa kha _____

Khumbelo yo hanelwa zwi tshi tevhedza _____

Muofisiri wa Mbilo (kha vha ṅwale nga vhuḓalo)

_____

Tsaino _____

Datumu _____

TSHIṮEMMBE TSHA OFISI YA ZWA MISHUMO NA VHASHUMI

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UI-2.3P

MULAYO WA NDINDAKHOMBO YA VHUSHAYAMUSHUMO WA VHU 63 WA 2001 SA ZWO KHWINISWAHO KHUMBELO YA MBADELO DZA MBUELO DZA VHUDZADZE

ZWI TSHI TEVHEDZA TSHIPIḌA TSHA VHU 25

Ḷiṅwalo ḷa Vhuṋe

1. Tshifani:

2. Tshifani tsha kale: *(Arali tsho shanduka u bva tshe vha ṋetshedza khumbelo yavho ya zwenezwino)*

3. Madzina:

4. Zwidodombedzwa zwa vhukwamani:

ARALI ḌIRESI YO SHANDUKA KHA VHA SUMBEDZE ZWIDODOMBEDZWA ZWISWA

5. Ḍiresi ya poswo:

6. Ḍiresi ya vhudzulo: *(Arali yo fhambana na ḍiresi ya poswo)* Khoudu ya poswo

7. *Datumu ye vha vhuelela ngayo mushumoni:* _____/_____/_____

8. MUANO:

Ndi khou ana, nga nnda ha zwe zwa sumbedzwa kha tshiteńwa tsha vhu 7, uri a thi athu u dovha nda shuma u bva ḓuvha ḷe nda ita ngalo khumbelo ya mbuelo dza u unḓa nahone ndo vha ndi sa khou wana muholo wo ḓoweleaho/kana u ṭanganedza tshipiḓa tsha muhoho wanga wo ḓoweleaho sa zwo sumbedzwaho nga mutholi wanga kha fomo ya UI-2.7 yo ṋetshedzwaho khathihi na fomo yanga ya khumbelo.

Ndi dovha hafhu nda ana uri zwidodombedzwa zwo ṋetshedzwaho ndi zwa vhukuma. Ndi a zwi ḓivha uri ndi mulandu u ṋetshedza tshitatamennde tshi si tsha vhukuma nga khole.
Arali ha nga badelwa masheleni o fhiraho zwo itwa nga khumbelo iyi ndi khou ḓikumedzela u humisela murahu masheleno nga vhuḓalo kha Tshikwama.

_____ _____/_____/_____

Tsaino nga muhumbeli Datumu

NB: ARALI ZWIDODOMBEDZWA ZWAVHO ZWA BANNGA ZWO SHANDUKA VHA TEA U ḌADZA NA U HUMISELA FOMO YA-2.8

NB!

- **FOMO IYI I TEA U ṊETSHEDZWA KHA OFISI YA MUHASHO WA ZWA MISHUMO NA VHASHUMI YA TSINISA NAVHO.**
- **FOMO DZO NO FHIRELWAHO NGA TSHIFHINGA A DZI NGA ṬANGANEDZWI.**
- **ARALI VHO THOMA U SHUMA HAFHU KANA VHO VHUELELA KHA AWARA DZAVHO DZA U SHUMA DZO ḌOWELEAHO, VHA TEA U ḌIVHADZA MUHASHO ZWA VHASHUMI NA MUSHUMO NGA U ṬAVHANYA NA U HUMBELA MUTHOLI MUSWA U ṊETSHEDZA MUANO (UI-19).**

Datumu ya u Ṭanganedzwa

UI-2.4

MULAYO WA NDINDAKHOMBO YA VHUSHAYAMUSHUMO WA VHU 63 WA 2001 SA ZWO KHWINISWAHO
KHUMBELO YA MBUELO DZA U UNḌA ZWI TSHI TEVHEDZA TSHITEŃWA TSHA VHU 26A (1), 27(3) na 29A(1) tshi tshi Vhalwa na Ndaulo 6(1)

Ḷiṅwalo ḷa vhuṋe | **Ḷiṅwalo ḷa vhuṋe ḷa ṅwana** | *Datumu ya Mabebo (dd/mm/yy)* | Mbeu: Munna ☐ Mufumakadzi ☐

Dzina | **Tshifani**

Ḍiresi ya Poswo | **Khoudu** | **Khoudu/Nomboro ya Luṱingo**

Diresi ya Vhudzulo | **Khoudu** | **Nomboro ya Luṱingothendeleki**

Mushumo | **Ḍiresi ya Imeḽi** | **Nomboro ya fekisi**

Pfunzo

THANZIELA YA TSHIKOLO TSHA TSHIPENTSHALA		**GIREIDI 8-9**		**GIREIDI 12**	
FHASI HA GIREIDI 8		**GIREIDI 10 - 11**		**NṰHA HA GIREIDI 12**	

Zwidodombedzwa zwa khumbelo yo fhiraho arali Ḷiṅwalo ḷa vhuṋe ḷo fhambana na ḷa zwino

a) a) Dzina na ḷiṅwalo ḷa vhuṋe ḷe vha ita khumbelo ngaḷo:

VHA KHA ḌISHUMA | ***EE*** | ***HAI***

NB: ARALI VHA TSHI KHA ḌI SHUMA, FOMO YA UI 2.7 I TEA U ḌADZWA.

ZWA NDEME: KHA VHA VHALE TSHITEŃWA ITSHI AFHO FHASI:

Arali khumbelo ya nga tendelwa, Muofisiri wa Mbilo u ḓo tendela mbadelo dza mbuelo. Ndi khou dovha nda dzhia vhuḓifhinduleli ha u ḓo ḓivhadza Muofisiri wa Mbilo nga u ṱavhanya ndi tshi tou wana muṅwe mushumo na u pfesesa uri u kundelwa u ita ngauralo zwi ḓo vha hu vhufhura.

Arali ha nga itwa mbadelo dzo fhiraho zwo vhangwa nga khumbelo iṅwe na iṅwe yo ṋetshedzwaho, ndi khou fulufhedzisa uri ndi ḓo humisela murahu masheleni oṱhe nga vhuḓalo kha Tshikwama.

Ndi khou ana uri zwidodombedzwa zwi re afho nṱha ndi zwa vhukuma. **TSAINO NGA MUHUMBELI** _____ **DATUMU:** _____/_____/_____	**TSAINO NGA MUOFISIRI** _____ **DATUMU:** _____/_____/_____	**Mbilo yo tendelwa kha** _____ **Khumbelo yo hanelwa zwi tshi tevhedza** _____ **Muofisiri wa Mbilo (kha vha ṅwale nga vhuḓalo)** _____ **Tsaino** _____ **Datumu** _____	**TSHIṰEMMBE TSHA OFISI YA ZWA MISHUMO NA VHASHUMI**

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UI-2.4P

MULAYO WA NDINDAKHOMBO YA VHUSHAYAMUSHUMO WA VHU 63 WA 2001 SA ZWO KHWINISWAHO

KHUMBELO YA MBUELO DZA U UNḌA

ZWI TSHI TEVHEDZA NDAULO YA VHU 6(3)

Ḷiṅwalo ḷa Vhuṋe

1. Tshifani:

2. Tshifani tsha kale: *(Arali tsho shanduka u bva nga tshifhinga tsha khumbelo yavho ya zwenezwino)*

3. Madzina:

4. Nomboro ya Vhukwamani

ARALI HO VHA NA TSHANDUKO YA ḌIRESI KHA VHA SUMBEDZE ZWIDODOMBEDZWA ZWAVHO ZWISWA

5. Ḍiresi ya poswo:

6. Ḍiresi ya Vhudzulo: *(Arali yo fhambana na ḍiresi ya poswo)* Khoudu ya poswo

7. **Arali vho thoma mushumo kha vha sumbedze datumu**: _____/_____/_____

➢ **NB! ARALI ZWIDODOMBEDZWA ZWAVHO ZWA BANNGA ZWO SHANDUKA VHA TEA U ḌADZA NA U HUMISELA FOMO YA UI-2.8**

Ndi khou ana uri :

Ndi khou ana, nga nnda ha zwe zwa sumbedzwa kha tshiteṅwa tsha vhu 7, uri a thi athu u dovha nda shuma u bva ḋuvha ḷe nda ita ngalo khumbelo ya mbuelo dza u unḋa nahone ndo vha ndi sa khou wana muholo wo ḋoweleaho/kana u ṭanganedza tshipiḋa tsha muhoho wanga wo ḋoweleaho sa zwo sumbedzwaho nga mutholi wanga kha fomo ya UI-2.7 yo ṋetshedzwaho khathihi na fomo yanga ya khumbelo.

Ndi dovha hafhu nda ana uri zwidodombedzwa zwo ṋetshedzwaho ndi zwa vhukuma. Ndi a zwi ḋivha uri ndi mulandu u ṋetshedza tshitatamennde tshi si tsha vhukuma nga khole.
Arali ha nga badelwa masheleni o fhiraho zwo itwa nga khumbelo iyi ndi khou ḋikumedzela u humisela murahu masheleni oṭhe nga vhuḋalo kha Tshikwama.

_____ _____

Tsaino ya Muhumbeli **Datumu**

NB!
- **FOMO IYI I TEA U ṆETSHEDZWA KHA OFISI YA MUHASHO WA ZWA MISHUMO NA VHASHUMI YA TSINISA NAVHO.**
- **FOMO DZO NO FHIRELWAHO NGA TSHIFHINGA A DZI NGA ṬANGANEDZWI.**
- **ARALI VHO THOMA U SHUMA HAFHU KANA VHO VHUELELA KHA AWARA DZAVHO DZA U SHUMA DZO ḌOWELEAHO, VHA TEA U ḌIVHADZA MUHASHO ZWA VHASHUMI NA MUSHUMO NGA U ṬAVHANYA NA U HUMBELA MUTHOLI MUSWA U ṆETSHEDZA MUANO.**

Datumu ya u Ṭanganedzwa

UI-2.5

MULAYO WA NDINDAKHOMBO YA VHUSHAYAMUSHUMO WA VHU 63 WA 2001 SA ZWO KHWINISWAHO KHUMBELO YA MBUELO YA MUUNḌWA NGA MUFARISI KANA MUFARISI WA VHUTSHILO HOŦHE ZWI TSHI TEVHEDZA TSHITEŃWA TSHA VHU 30 Tshi tshi Vhalwa na Ndaulo 7(1)

A. ZWIDODOMBEDZWA ZWA MUFU:

Ḽiṅwalo ḽa Vhuṱe | *Datumu ya Mabebo (dd/mm/yy)* | *Mbeu* Munna / Mufumakadzi

Madzina | **Tshifani** | **Datumu ya u lovha**

Ḓiresi ya Vhudzulo ha u Fhedza | **Khoudu**

Zwidodombedzwa zwa khumbelo yo fhiraho arali Ḽiṅwalo ḽa vhuṱe ḽo fhambana na ḽa zwino

a) Dzina na ID/Pasipoto ye mufu a ita ngayo khumbelo:

B. ZWIDODOMBEDZWA ZWA MUFARISI KANA MUFARISI WA VHUTSHILO HOŦHE ANE A KHA ḒI TSHILA

Ḽiṅwalo ḽa Vhuṱe | ***Datumu ya Mabebo (dd/mm/yy)*** | ***Mbeu*** Munna / Mufumakadzi

Madzina | **Tshifani**

Ḓiresi ya Poswo | **Khoudu** | **Nomboro ya Luṱingo**

Ḓiresi ya Vhudzulo | **Khoudu** | **Nomboro ya Luṱingothendeleki**

Ḓiresi ya Imeḽi

Ndi khou ana uri ndi muṅwe wa _____ vhafarisi kana ndi mufarisi muthihi fhedzi ane a kha ḓi tshila wa mufu o bulwaho afho nṱha, na uri ndo vha ndi songo ṱalana nae na zwidodombedzwa zwo ṋetshedzwaho ndi zwa vhukuma.

Arali ha nga vha na mbadelo dzo fhiraho zwo vhangwa nga khumbelo iyi, ndi khou ḓikumedzela uri ndi ḓo humisela murahu masheleni oṱhe nga vhuḓalo kha Tshikwama.

Ndi a pfesesa uri ndi mulandu u ṋea tshitatamennde tsha mazwifhi.

TSHUMISO NGA OFISI FHEDZI:

Ndi khou ana uri zwidodombedzwa zwi re afho nṱha ndi zwa vhukuma. TSAINO NGA MUHUMBELI Datumu_____/_____/_____	TSAINO NGA MUOFISIRI Datumu: _____/_____/_____	Mbilo yo tendelwa kha: _____ Khumbelo yo hanelwa zwi tshi tevhedza: _____ Muofisiri wa mbilo (kha vha ṅwale nga vhuḓalo): _____ Tsaino: _____ Datumu: _____	Tshiṱemmbe tsha Muhasho wa zwa Mishumo

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UI-2.6

MULAYO WA NDINDAKHOMBO YA VHUSHAYAMUSHUMO WA VHU 63 WA 2001 SA ZWO KHWINISWAHO

KHUMBELO YA MBUELO DZA MUUNḌWA NGA MUUNḌI/ŃWANA ANE A VHA MUUNḌWA KANA MUUNḌWA O TOU TIWAHO ZWI TSHI TEVHEDZA TSHITEŃWA TSHA VHU 30 TSHI TSHI VHALWA NA NDAULO YA VHU 7(1) NA 7(2)

A. ZWIDODOMBEDZWA ZWA MUFU:

Ḷiṅwalo ḷa Vhuṋe | *Datumu ya Mabebo (dd/mm/yy)* | *Mbeu* Munna / Mufumakadzi

Madzina | **Tshifani** | **Datumu ya Mabebo**

Ḍiresi ya Vhudzulo ha u fhedza | **Khoudu**

Zwidodombedzwa zwa khumbelo yo fhiraho arali Ḷiṅwalo ḷa Vhuṋe ḷo fhambana na ḷa zwino

a) Dzina na Ḷiṅwalo ḷa vhuṋe zwe mufu a ita khumbelo ngazwo:

B. ZWIDODOMBEDZWA ZWA MUHUMBELI:

Muunḍi wa ńwana muṱuku | **Ńwana ane a vha muunḍwa** | **Muunḍwa o tou tiwaho**

Ḷiṅwalo ḷa Vhuṋe | Datumu ya Mabebo (dd/mm/yy) | Mbeu Munna / Mufumakadzi

Madzina | **Tshifani**

Ḍiresi ya Vhupo | **Khoudu** | **Nomboro ya Luṱingo**

Ḍiresi ya Vhudzulo | **Khoudu** | **Nomboro ya luṱingothendeleki**

C. ZWIDODOMBEDZWA ZWA ŃWANA:

Madzina | **Tshifani**

Ḍiresi ya Vhudzulo | **Khoudu**

D. ZWIDODOMBEDZWA ZWA ŃWANA:

Madzina | **Tshifani**

Ḍiresi ya Vhudzulo | **Khoudu**

Arali ha nga vha na mbadelo dzo fhiraho zwo vhangwa nga khumbelo iyi, ndi khou ḍikumedzela uri ndi ḍo humisela murahu masheleni oṱhe nga vhuḍalo kha Tshikwama.

Ndi a pfesesa uri ndi mulandu u ṋea tshitatamennde tsha mazwifhi

Ndi khou ana uri zwidodombedzwa zwi re afho ṋṱha ndi zwa vhukuma. **TSAINO NGA MUHUMBELI** _____ **DATUMU:** _____/_____/_____	**TSAINO NGA MUOFISIRI** _____ **DATUMU:** _____/_____/_____	**Mbilo yo tendelwa kha** _____ **Khumbelo yo hanelwa zwi tshi tevhedza** _____ **Muofisiri wa Mbilo (kha vha ńwale nga vhuḍalo)** _____ **Tsaino** _____ **Datumu** _____	**TSHIṰEMMBE TSHA OFISI YA ZWA MISHUMO NA VHASHUMI**

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UI-2.7

MULAYO WA NDINDAKHOMBO YA VHUSHAYAMUSHUMO WA VHU 63 WA 2001 SA ZWO KHWINISWAHO MUHOLO WO ŦANGANEDZWAHO NGA MUTHOLIWA A TSHI KHOU SHUMA

Kha: Muofisiri wa Mbilo

Tshitatamennde maelana na mbadelo dzo itwaho kha Mubvisi wa Masheleni o bulwaho afho nṱha ane nda kha ḓi vha ndo mu thola fhedzi a sa khou kona u shuma zwi tshi vhangwa nga vhulwadze; ḽivi ya Vhudzadze; Ḽivi ya u adoptha, Ḽivi ya Mubebi (sorogesi), Ḽivi ya Mubebi kana Tshifhinga tsha u Shuma tsho fhungudzwaho (RWT)

Madzina nga vhuḓalo a mubvisi wa masheleni: _____

Ḽiṅwalo ḽa Vhuṋe													

Dzina ḽa mutholi: _____

Nomborondaula ya Mutholi ya UIF | | | | | | | | / | |

(A) Zwi tshi tevhedza tshiteṅwa tsha vhu 12(1)b, 19(1), 24(2), 26A(1), 27(3) na 29A(1) tsha Mulayo wo bulwaho afho nṱha,
Ndi khou khwaṱhisedza uri mubvisi wa masheleni u ḓo wana phesenthe dza fhasi ha 100 kha muholo/mbuelo yawe u bva nga ḽa _____ /_____/_____ (daumu nga vhuḓalo) zwo vhangwa nga:

Ḽivi ya Mubebi		Ḽivi ya mubebi **(SOROGESI)**		Ḽivi ya u Lwala		Ḽivi ya u Vhudzadze		Ḽivi ya u adoptha		Tshifhinga tsha u shuma tsho fhungudzwaho	

Zwifhinga zwe ha ṱanganedzwa phimo dzo fhambanaho dza muholo musi vha ḽivini/RWT (ZWI ḒO SUMBEDZWA KHA ṄWEDZI)				**Muhologute wo tanganedzwaho vha ḽivini/RWT (nga ṅwedzi)**
U bva kha		U ya kha		
U bva kha		U ya kha		
U bva kha		U ya kha		
U bva kha		U ya kha		
U bva kha		U ya kha		
U bva kha		U ya kha		
U bva kha		U ya kha		
U bva kha		U ya kha		
U bva kha		U ya kha		

(B) Mubvisi wa masheleni u khou lavhelelwa u/o thoma u shuma awara dzo fhelelaho nga ḽa _____/_____/_____.

_____

TSAINO YA MUTHOLI KANA NZHENDEDZI ḼO TENDELWAHO

DATUMU:_____/ _____/_____

TSHIŦEMMBE TSHA MUTHOLI (arali tshi hone)

UI-2.8

TSHIKWAMA TSHA NDINDAKHOMBO YA VHUSHAYAMUSHUMO

THENDELO YA MBADELO DZA MBUELO KHA AKHAUNTHU YA BANNGANI

I tea u ḓadzwa nga Tshiimiswa tsha zwa Masheleni (Bannga/Poswo)

NB: A hu na tshanduko dzine dza tea u itwa kha fomo iyi

Dzina ḷa Muṋe wa Akhaunthu _____,

(Madzina nga vhuḓalo na tshifani nga maḽeḓeredanzi)

Ḽiṅwalo ḷa Vhuṋe

Dzina ḷa Tshiimiswa tsha zwa Masheleni _____

Khoudu ya davhi

Nomboro ya akhaunthu

Kha vha sumbedze nga "X"

Savings account		**Current account**		**Transmission account**	

A I shumi:		**I khou shuma**	

Ndi khou ana uri zwidodombedzwa zwo sumbedzwaho afho nṱha ndi zwa vhukuma na u vha zwo fhelelaho kha tshiteṅwa tshiṅwe na tshiṅwe na uri Khomishinari wa Ndindakhombo ya Vhushayamushumo ha nga hweswi vhuḓifhinduleli arali ha nga itwa mbadelo dzi si dzone zwo vhangwa nga zwidodombedzwa zwi si zwa vhukuma/zwi songo fhelelaho zwe nda ṋetshedza.

_____

Dzina ḷa Bannga/muofisiri wa Poswoni

_____

Tsaino nga Muofisri wa Bannga/Poswo
Tshiṱemmbe tsha Bannga

Datumu: _____

Hu ḓadzwa nga Muhumbeli

Nṋe, _____

(Dzina na Tshifani nga maḽeḓeredanzi)

Ḽiṅwalo ḷa Vhuṋe

Ndi khou ṋea thendelo Khomishinari wa Ndindakhombo ya Vhushayamushumo/Muofisiri wa Mbilo u badela mbuelo, arali dzo tendelwa, kha akhaunthu yo sumbedzwaho afho nṱha ine ya vha kha Tshiimiswa tsha zwa Masheleni, nga nnḓa ha musi ho ṋewa ndaela yo tou ṅwalwaho.

Ndi khou ana uri zwidodombedzwa zwo ṋetshedzwaho nga Tshiimiswa tsha zwa Masheleni tsho sumbedzwaho afho nṱha ndi ḓivha zwi zwone na u vha zwo fhelelaho. Ndi khou fulufhedzisa UIC nga ha u dzhia vhuḓifhinduleli vhuṅwe na vhuṅwe kha mbadelo dzine dza ḓo itwa kha akhaunthu ya bannga yo ṋetshedzwaho arali akhaunthu ya nga vha i si yone kana i songo fhelela.

_____ _____

Tsaino nga muhumbeli Datumu

UI-2.9

MULAYO WA NDINDAKHOMBO YA VHUSHAYAMUSHUMO WA VHU 63 WA 2001 SA ZWO KHWINISWAHO
KHUMBELO YA THENDELO YA MBUELO DZA MUBEBI ZWI TSHI TEVHEDZA TSHITEŃWA TSHA 26A (1), 27(3) na 29A (1) Tshi tshi khou vhalwa na Ndaulo 6(1)

VHA HUMBELWA U NANGA LUSHAKA LWA MBUELO LUNE VHA KHOU TAMA U ITA KHUMBELO YALWO:

Mubebi		Muundi		Thendelo ya Mubebi	

Liṅwalo ḽa Vhuṋe | Liṅwalo ḽa Vhuṋe ḽa ṅwana | *Datumu ya Mabebo (dd/mm/yy)* | *Mbeu* | Munna | | Mufumakadzi |

Dzina | **Tshifani**

Ḓiresi ya Poswo | **Khoudu** | **Khoudu /Nomboro ya Luṱingo**

Ḓiresi ya Vhudzulo | **Khoudu** | **Nomboro ya Luṱingothendeleki**

Mushumo | **Ḓiresi ya Imeiḷi** | **Nomboro ya Fekisi**

Pfunzo

ṰHANZIELA YA TSHIKOLO TSHA TSHIPESHALA.		**GIREIDI 8-9**		**GIREISI 12**	
FHASI HA GIREIDI 8		**GIREIDI 10 - 11**		**NṰHA HA GIREIDI 12**	

Zwidodombedzwa zwa khumbelo yo fhiraho arali liṅwalo ḽa vhuṋe ḽo fhambana na ḽa zwino

a) Dzina na liṅwalo ḽa vhuṋe ḽe vha ita khumbelo ngaḽo:

EE | *HAI*

VHA KHA ḒI SHUMA

NB: ARALI VHA TSHI KHA ḒI SHUMA, HU TEA U ḒADZWA FOMO YA UI 2.7.

ZWA NDEME: KHA VHA VHALE TSHITEŃWA ITSHI AFHO FHASI:

Arali khumbelo ya nga tendelwa, Muofisiri wa Mbilo u ḓo tendela mbadelo dza mbuelo. Ndi khou dovha nda dzhia vhuḓifhinduleli ha u ḓivhadza Muofisiri wa Mbilo nga u ḽavhanya ndi tshi tou wana muṅwe mushumo na u pfesesa uri u kundelwa u ita ngauralo zwi ḓo vha hu vhufhura.

Arali ha nga itwa mbadelo dzo fhiraho zwo vhangwa nga khumbelo iṅwe na iṅwe yo ṋetshedzwaho, ndi khou fulufhedzisa uri ndi ḓo humisela murahu masheleni nga vhuḓalo kha Tshikwama.

Ndi khou ana uri zwidodombedzwa zwi re afho nṱha ndi zwa vhukuma. **TSAINO NGA MUHUMBELI** _____ **DATUMU:** _____/_____/_____	**TSAINO NGA MUOFISIRI** _____ **DATUMU:** _____/_____/_____	**Mbilo yo tendelwa kha** _____ **Khumbelo yo hanelwa zwi tshi tevhedza** _____ **Muofisiri wa Mbilo (kha vha ṅwale nga vhuḓalo)** _____ **Tsaino** _____ **Datumu** _____	**TSHIṰEMMBE TSHA OFISI YA ZWA MISHUMO NA VHASHUMI**

EE

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UI-2.9P

MULAYO WA NDINDAKHOMBO YA VHUSHAYAMUSHUMO YA VHU 63 YA 2001 SA ZWO KHWISWAHO
KHUMBELO YA MBADELO YA MBUELO DZA MUBEBI
ZWI TSHI TEVHEDZA NDAULO YA VHU 6(3)

Ḷiṅwalo ḷa Vhuṋe

1. Tshifani:

2. Tshifani stha kale: *(Arali tsho shanduka u bva tshe vha ṋetshedza mbilo ya zwenezwino)*

3. Madzina:

4. Nomboro ya vhukwamani:

ARALI HO VHA NA TSHANDUKO YA ḌIRESI KHA VHA SUMBEDZE ZWIDODOMBEDZWA ZWAVHO ZWISWA

5. Ḍiresi ya Poswo:

6. Ḍiresi ya Vhudzulo: *(Arali yo fhambana na ḍiresi ya poswo)* Khoudu ya Poswo

7. **(a) Arali vho humela mushumoni kha vha sumbedze datumu**: _____/_____/_____

(b) Dzina ḷa mutholi muswa: _____ **Nomboro ya Vhukwamani ya Mutholi**: _____

(c) Arali Tshifhinga tsha Mushumo tsho Fhungudzwaho tsho fhela kha vha sumbedze datumu _____/_____/_____

➢ **NB! ARALI ZWIDODOMBEDZWA ZWAVHO ZWA BANNGA ZWO SHANDUKA VHA TEA U ḌADZA NA U HUMISELA FOMO YA-2.8**

Ndi khou ana uri :

- **A thi khou shuma nahone ndo vha ndi sa shumi u bva tshe nda ṋetshedza khumbelo/u ḋadza fomo ya u bvelaphanḋa na uri a thi athu u ṭanganedza muholo kana mbadelo dza ndivhuwo kha mushumo muṅwe na muṅwe wo shumiwaho ndi songo ḋivhadza Muofisiri wa Mbilo.**
- **Ndi khou shuma Tshifhinga tsha Mushumo tsho Fhungudzwaho (*arali zwo tou ralo*)**
- **Ndi a zwi divha uri ndi mulandu u ḋadza fomo ya u bvelaphanḋa ndi tshi khou shuma/ndi si ho kha Tshifhinga tsha u Mushumo tsho Fhungudzwaho ndi songo ḋivhadza Muofisiri wa Mbilo uri ndo vhuelela mushumoni.**
- **Ndi dovha hafhu nda ana uri zwidodombedzwa zwo ṋetshedzwaho ndi zwa vhukuma. Ndi a zwi ḋivha uri ndi mulandu u ṋetshedza tshitatamennde tsha mazwifhi nga khole.**

_____ _____/_____/_____
Tsaino ya muhumbeli Datumu

NB!
- ➢ **FOMO IYI I TEA U ṊETSHEDZWA KHA OFISI YA MUHASHO WA ZWA MISHUMO NA VHASHUMI YA TSINISA NAVHO.**
- ➢ **FOMO DZO NO FHIRELWAHO NGA TSHIFHINGA A DZI NGA ṬANGANEDZWI.**
- ➢ **ARALI VHO THOMA U SHUMA HAFHU KANA VHO VHUELELA KHA AWARA DZAVHO DZA U SHUMA DZO ḌOWELEAHO, VHA TEA U ḌIVHADZA MUHASHO ZWA VHASHUMI NA MUSHUMO NGA U ṬAVHANYA NA U HUMBELA MUTHOLI MUSWA U ṊETSHEDZA MUANO (UI-19).**

Datumu ya u Ṭanganedzwa:	

UI-53

FOMO YA U TA MBUELO DZA VHAUNḎWA KHA UIF (VHA HUMBELWA U DZHIELA NZHELE URI A HU NA TSHANDUKO DZINE DZA ḎO ṮANGANEDZWA KHA FOMO IYI)

Nṋe _____, Ḷiṅwalo ḷa Vhuṋe

(Dzina nga vhuḓalo na tshifani tsha mutholiwa)

Zwa zwino ndo tholiwa _____ Nomborondaula ya UIF _____, ndi khou ta mu/vhathu vha tevhelaho vho sumbedzwaho uri vha kone u wana Mbuelo dza Vhaunḓwa dza UIF arali nda nga lovha.

1. MUFARISI / MUFARISI WA VHUTSHILO HOṮHE

Tshifani	Madzina nga vhuḓalo	Vhushaka na mutholiwa	Datumu ya mabebo	Ḷiṅwalo ḷa Vhuṋe

2. ṄWANA/VHANA VHA MIṄWAHA YA FHASI HA 21 KANA MUGUDI KANA ṄWANA ANE A KHOU UNḎWA

Tshifani	Madzina nga Vhuḓalo	Datumu ya Mabebo	Ḷiṅwalo ḷa Vhuṋe

3. MUTHU WE VHA MU TA ***(arali vhatiwa vha tshi fhira muthihi, phesenthe dzi tea u avhelwa nga muthu ane a khou ta)***

Tshifani	**Madzina nga vhuḓalo**	**Datumu ya mabebo**	**Nomboro ya ID/Phasipoto/ Phemithi ya vhukuma**	**Vhushaka na mutholwa**	**PHesenthe yo avhelwaho**
Phesentheguṯe					**100%**

Nṋe,_____ndo sainaho afha ndi khou pfesesa uri nyimele dzanga na avho vhathu vho sumbedzwaho afho nṯha sa vhaunḓwa na/kana vhatiwa dzi nga shanduka. Kha nyimele ine ha nga vha na tshanduko, ndi khou fulufhedzisa u ḓadza na u ṋetshedza hafhu fomo UI-53 kha mutholi wanga uri i rumelwe kha Muhasho wa zwa Mishumo na Vhashumi.

Yo sainiwa: _____ nga ḷa _____

_____

TSAINO YA MUTHOLIWA

_____ _____ _____

DZINA NGA VHUḎALO ḶA MUIMELELI *TSAINO YA MUTHOLI* *DATUMU*

- ***VHA KHOU HUMBELWA U DZHIELA NZHELE URI A HU NA TSHANDUKO DZINE DZA ṮANGANEDZWA KHA FOMO IYI***

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