RESTRICTED

ANNEX 'E' TO
PART 1 TO
JCSC 34 JOINING INSTR
DATED.....AUG 20

INDIVIDUAL NOTIFICATION OF CASUALTY (NOTICAS) DETAILS

(To be completed by all students. Use Blue Ink and write legibly in capital letters)

A.	PERS	ONAL DETAILS			
	1.	Service/Regimental Number:		2.	Rank:
	3.	First Name(s):		4.	Surname:
	5.	Formation/Base/Unit/Department:		• • • • • • • • • • • • • • • • • • • •	
	6. Police	Service: Army/ Air Force/ Navy/ National // Prison Service/ Intelligence/ Other. If other,			
	7.	Date of Attestation/Engagement:		8.	Period of Service:
	9.	Type of Engagement:	(Indi	cate Initial	/Medium/Permanent Service)
	10.	Previous Occupation (Immediately before joining	ng curre	nt organiza	tion):
	11.	Period of Previous Employment:		• • • • • • • • • • • • • • • • • • • •	
	12.	Date of Birth:	13.	Place of	Birth:
	14.	Sex:	15.	Age:	
	16.	Nationality:	17.	Country	<i>7</i> :
	18.	Marital Status:	(Inc	licate Num	nber of Children)
	19.	Blood Group:	20.	Religio	n:
	21.	Academic Qualifications:			.(the highest)
	22.	Last Academic Institution Attended:			
	23.	Passport Number:	Place	of Issue:	
	25.	Date of Issue:	Date	of Expiry	
	27.	Official Specimen Signature:			

E-1 **RESTRICTED**

(The signature you use on all your official documents)

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28.	Conta	ct Details:					
	a.	Physical Address:					
	b.	Postal Address:					
	c.	Phone Number(s):					
		(1) Business: (2) Home:					
		(3). Cell:					
NEXT OF KIN DETAILS							
29. First Choice:							
	a.	First Name(s) and Surname:					
	b.	Relationship:					
	c.	Period of that Relationship to date:					
	d.	Contact Details:					
		(1) Physical Address:					
		(2) Postal Address:					
		(3) Phone Number(s):					
		(a) Business:(b) Home:					
		(c) Cell:					
30.	Second Choice:						
	a.	First Name(s) and Surname:					
	b. c.	Relationship: Period of that Relationship to date:					
	NEXT 29.	a. b. C. NEXT OF K 29. First a. b. c. d. 30. Seconda. b.					

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		d.	Contact Details:					
			(1)	Physi	ical Address:			
			(2)	Posta	al Address:			
			(3)		ne Number(s):			
				(a)	Business:		(b) Home:	
				(c)			lude Local Cell Number)	
C. N	AOR	RE INF	ORMA	TION	(To be complete	ed by Zimbab	weans only)	
3	1.	Identi	ity Nun	nber:		32.	Kraal:	
3	3.	Head	man:			33.	Chief:	
3	4.	Distri	ct:			35.	Province:	
3	6.	ZDFI	BF Mer	nbership	p(Member/Not a		Date Joined:	
3	7.	j CC						
		(Include Country)						
3	8.	Last 1	Date of	Promot	tion:	• • • • • • • • • • • • • • • • • • • •		
3	9.	Meda	ls Rece	eived:				
		a.				b.		
		c.				d.		
		DEC	LARA'	TION				
b		f my kı	nowled	_	should the ZSC t		ls I have provided are correct to the incorrect about them, I will be	
Signed:	:					Date	:	
						т. о		

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