

**CHECKLIST OF REQUIREMENTS
REQUEST FOR A CERTIFICATION OF AWARD**

Requirements		Copy required		Mark (x) if NOT submitted
1	Request Form			
2	Any one Government-issued picture ID with signature			

The applicant is hereby informed/advised to:

1. **Submit the lacking documents marked as x, as soon as available.**
2. **Original and certified copies with photocopy requirements are for validation purposes only.**
3. **NHA action on request shall start only after submission of complete documentary requirements.**

I understand and will submit the lacking documents.

Action taken by:

Signature over printed name
Applicant

Signature over printed name

Designation

Date

Date

Noted by:

Signature over printed name
Head , EM Unit

Date