

Appilication Form

Basic Information			
Company Name:			
Physical Address:			
Tel I	3- E mail		
Certificate of Inc. No	5- SSCCIA Membersh	ip No	
Contact Person, Tel:	E mail:		
Company Business Status			
ear of the start of business in South Sudan			
Duration in Business	3- Capital Invested Y	ear 2021	SSP
Capital invested during the year 2022	5- Capit	al to be invested du	ring tł Year 2023
Total Turn Over Year 2021 in SSP	7- Total	Turn Over Year 2022	2 in SSP
Company Registration: a. Local (national)	International with L	ocal Partner	
Mention Areas of Operation in South Sudan (Sta	tes)		
-			
The Labour Market			
Number of National Employees in 2021	Male (s)	Female (s)	Total
Number of National Employees in 2022	Male (s)	Female (s)	Total
Products / Services Offered			
write brief about uniqueness of the products and	d services offered by your c	ompany.	

	hy do you think the products and services offered by your company is the best and im		
or S	outh Sudan Population. (you can attach seprate sheet to p	orovide more detai	IS)
	ased on your company record provide estimate of customers number benifiting from	your product/serv	ices
ı tn	e year 2022		
· C	apacity Building		
N	umber of National Employees Trained by your Company Year 2021umber of South Sudaneses nationals offered internship in 2021	2022	
		2022	
	umber of South Sudaneses nationals offered internship in 2021 umber of national staff Occupying Mamanagment Positions	2022	
		2022	
- N		2022	
- N	umber of national staff Occupying Mamanagment Positions	2022	
- N - C	orporate Social Responsibility performances	2022	
· C	orporate Social Responsibility performances st of number of communities that received charitable support from your company. 1. Community name		
- N - C - Li	orporate Social Responsibility performances st of number of communities that received charitable support from your company.		
- N - C - Li	orporate Social Responsibility performances st of number of communities that received charitable support from your company. I. Community name II. Community leader name		
· C	orporate Social Responsibility performances st of number of communities that received charitable support from your company. I. Community name II. Community leader name III. Community location		
- N - C - Li	prporate Social Responsibility performances St of number of communities that received charitable support from your company. I. Community name		
- N - C - Li	orporate Social Responsibility performances st of number of communities that received charitable support from your company. I. Community name		
- N - C - Li:	prporate Social Responsibility performances St of number of communities that received charitable support from your company. I. Community name II. Community leader name IV. Financial cost of the charitable support in SSP V. Community project implemented I. Community name II. Community name II. Community leader name		
- N - C - Li	proporate Social Responsibility performances st of number of communities that received charitable support from your company. I. Community name		
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- N - C - Li:	prporate Social Responsibility performances St of number of communities that received charitable support from your company. I. Community name		

l	VI
II	VII
II	VIII
V	IX
V	X
2- Total amount paid as tax in the year 2021	
3- Total amount paid as tax in the year 2022	
Mention any other contribution by your company to the	people of South Sudan
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II.	
III	
Declaration	
1 D A in /D A in a	
	information I will submit to SSNCCIA through thid form
a- I have no objection to contact any office regarding the	•
a- I have no objection to contact any office regarding the b-By making an application for SSNCCIA Quality Award a	•
a- I have no objection to contact any office regarding the b-By making an application for SSNCCIA Quality Award a	•
a- I have no objection to contact any office regarding the b-By making an application for SSNCCIA Quality Award a provided in this form is true and complete	nd filling this form, I do confirm that the information
I Mr/Mrsa- I have no objection to contact any office regarding the b- By making an application for SSNCCIA Quality Award a provided in this form is true and complete Signiture and Company Stamp:	nd filling this form, I do confirm that the information
a- I have no objection to contact any office regarding the o-By making an application for SSNCCIA Quality Award a provided in this form is true and complete	nd filling this form, I do confirm that the information