

TANZANIA ASSOCIATION OF FOOD SCIENTISTS AND TECHNOLOGISTS

LEADERSHIP APPLICATION FORM

SECTION 1 – Personal Information	
Surname:	First name: Other names;
Physical address:	Current Employment Status/Occupation
Postal address:	Current Employment details; Organization name and address, position, title:
1	••••••
Phone	
	tion(s) You are applying for (Mark √) where
applicable on the	e table below.
Chairman	
Vice Chairman	
Secretary	
Treasurer TAEST MEMBERSI	IP NUMBER(Attach TAFST ID)
	tion(Attach TAFST ID)
certify that to the hes	of my knowledge, the information contained herein is true and correct.
certify that, to the bes	of my knowledge, the information contained herein is true and correct.
Date:	Signature:
Date:	Signature.
SECTION 3-Submi	ssion
Completed filled	form with a short CV and TAFST ID should be sent to: -
General Secretary Email: tafst1993 Cc info@tafst.org Or WhatsApp Nu	gmail.com
Deadline for request su	omission is on 20th January, 2024 (East Africa Time)
SECTION 4. For Off	icial Use Only
	Application Post:
	Date received:
	Application Validation status:
	General Remarks: