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DECLARATION FORM

KINGDOM OF ESWATINI

COMMISSION ON HUMAN RIGHTS AND PUBLIC ADMINISTRATION/INTEGRITY Declaration of Assets and Liabilities in terms of Section 241 (1) of the Constitution of the Kingdom of Eswatini Act No.001 of 2005

1. NAME OF THE OFFICE HOLDER:

(Surname)

(First Name)

(Other Names)

2. DEMOGRAPHIC INFORMATION:

- a) Date of Birth:
- b) Place of Birth:
- c) Personal ID Number:
- d) Nationality:
- e) Marital status:
- f) Chief:
- g) Indvuna:

3. ADDRESS:

- a) Postal Address:
- b) Physical Address:

c) Contacts:
 Tel:
 Cell:
 Email address:

EMPLOYMENT INFORMATION:

4. a) Employment No.
 Designation:
 b)
 c) Name of Employer:
 d) Nature of Employment (Permanent, Temporary, Contract etc) (tick)

5. NAME OF SPOUSE/S:

- i)
 ii)
 iii)
 iv)
 v)

6. FINANCIAL STATEMENTS* for:

(A separate statement is required for the officer and each spouse. Additional sheets should be added as required)

- a. Statement date:
 b. Income, including emoluments, for the period from

..... to

(Including, but not limited to, salary and emoluments and income from investment. The period is from the previous statement date to the current statement date. For an initial declaration, the period is the year ending on the statement.)

Description	Approximate Amount

7. ASSETS (as of date declaration)

(Including, but not limited to, land, buildings, vehicles and financial obligations owed to the leader):

Description	Approximate Value
Immovables*	

** Provide clear description of property; location; and plot number, street name and town and also attach a copy of Title Deed where applicable).*

Description	Approximate Value
Movables*	

** Provide full descriptions of property e.g. (for motor vehicle include registration number, model, make, type. A Blue Book for motor vehicle should be attached.)*

Description	Approximate Value
Debtors and Other	

SOLEMN DECLARATION OF ASSETS AND LIABILITIES

I,.....(Full Name),
Holding the office of (Name of
office held by declarant) do solemnly and sincerely declare that the statement
of Assets and Liabilities accompanying this declaration is made by me for the
purpose of Section 241 (1) of the Constitution of the Kingdom of Eswatini and is
a true and complete account of:

- a) My assets and liabilities as at (date of first
Declaration);
- b) My assets and liabilities at the end of a period of two years from the date of
my last declaration; or
- c) My assets and liabilities at the end of my term of office; and

**select applicable field (a or b or c)*

I make this solemn declaration conscientiously believing the same to be true.

Signature

Subscribed and solemnly declared before me on this day of
.....20.....

.....
COMMISSIONER
INTEGRITY COMMISSION

