

KenGen EMPLOYEE GIVER INITIATIVE

COMMITMENT FORM

STAFF DETAILS:

Name: _____

Work Area/Station: _____

Division: _____

Staff No: _____

Position/Title: _____

Personal Mobile: _____

Work Tel: _____

Work Email: _____

MONETARY SUPPORT

I hereby commit to supporting the following Corporate Social Investment (CSI) programs:

1. STAFF SUBSCRIPTIONS towards Pooled Foundation Fund [to be used on projects requiring immediate financing]

1.1 Sub - Executive [Kes 1,000 per month] ☐

1.2 Sub - Foundation [Kes 500 per month] ☐

1.3 Sub - Champions [Kes 200 per month] ☐

2. ENDOWMENT FUND:

2.1 Monetary Support of Kes (figures) _____; to be deducted ☐ One-off support/ ☐ Monthly support

3. CORPORATE SOCIAL INVESTMENT PROJECTS

3.1 EDUCATION

3.1.1 Edu - Scholarships ☐ Kes (figures) _____; ☐ One-off support/ ☐ Monthly support

3.1.2 Edu - Infrastructure ☐ Kes (figures) _____; ☐ One-off support / ☐ Monthly support

3.1.3 Edu - Mentorship ☐ Kes (figures) _____; ☐ One-off support / ☐ Monthly support

3.2 ENVIRONMENTAL PROJECTS

3.2.1 Env - Afforestation ☐ Kes (figures) _____; ☐ One-off support/ ☐ Monthly support

3.3 WATER & SANITATION PROJECT

- 3.3.1 Wat - Rainwater Systems ☐ Kes (figures) _____; ☐ One-off support / ☐ Monthly support
- 3.3.2 Wat-Latrines&Handwashing ☐ Kes (figures) _____; ☐ One-off support / ☐ Monthly support
- 3.3.3 Wat - Sand dams&Earth dams ☐ Kes (figures) _____; ☐ One-off support / ☐ Monthly support

I CONFIRM THAT I **WILLINGLY** COMMIT TO SUPPORTING **BY MONETARY DONATION**, THE ABOVE SELECTED CORPORATE SOCIAL INVESTMENT PROJECTS.

- ✓ I AUTHORISE KenGen FINANCE AND HR TO MAKE THE NECESSARY CHECK-OFF PAYMENTS FROM MY SALARY FOR SELECTED **ONE-OFF DONATIONS FOR THE MONTH OF** _____ **2015.**
- ✓ I AUTHORISE KenGen FINANCE AND HR TO CARRY OUT MONTHLY DEDUCTIONS FROM MY SALARY FOR SELECTED **MONTHLY DONATIONS, STARTING** _____ **2015** UNTIL FURTHER INSTRUCTIONS FROM ME.

Name-----

Date-----

TIME & SKILLS SUPPORT

I wish to give my time and skills as may be required in support of the following Corporate Social Investment programs:

4.0 EDUCATION

- 4.1 Donation of Academic & Personal students' effects ☐
- 4.2 Infrastructure Construction & Rehabilitation ☐
- 4.3 Mentorship Program ☐

5.0 ENVIRONMENTAL PROJECTS

- 5.1 Afforestation activities ☐
- 5.2 Donation of seedlings ☐
- 5.3 Establishment of community nurseries ☐
- 5.4 Environmental Advocacy activities ☐

6.0 WATER & SANITATION PROJECTS

- | | | |
|-----|---|--------------------------|
| 6.1 | Rainwater Harvesting Systems for Schools & Households | <input type="checkbox"/> |
| 6.2 | Provision of Latrines & Hand-washing Facilities | <input type="checkbox"/> |
| 6.3 | Construction of Sand dams, water pans& Earth dams | <input type="checkbox"/> |
| 6.4 | Advocacy activities on Water and Sanitation | <input type="checkbox"/> |

I CONFIRM THAT I HAVE **WILLINGLY** COMMITTED TO USE MY TIME AND SKILLS TO SUPPORT **THE SPECIFIED ACTIVITY (IES)**

Name:

Staff No:

Signature:

Date:

KenGen Foundation

P.O. Box 47936 - 00100, Nairobi
Kolobot Road, Parklands.

Landline: +254 20 366 6709

Mble: +254 711 036 709

www.kengenfoundation.co.ke

Email: imbaka@kengen.co.ke

Facebook: KenGen Foundation

Twitter: @kengenfoundatn

To change your CHECK – OFF DEDUCTION INSTRUCTIONS:

- ✓ Kindly download a **DEDUCTION ADVISE FORM** from the Foundation website (www.kengenfoundation.co.ke),
- ✓ Fill it and email it or deliver it to the Foundation. The contact person is Lydia Mbaka; imbaka@kengen.co.ke; Ext 6709.
- ✓ The filled form shall be forwarded to Finance and HR for processing.

Please Note: The Form should be emailed or delivered to the Foundation **by the 5th day of the month** to enable your deduction instructions to be effected with

