

**PART I**

FULL NAME OF APPLICANT:	
DEPARTMENT/MINISTRY/PROVINCE:	
DESIGNATION:	
STATION:	
EMPLOYEE NUMBER:	(PLEASE INDICATE IN FULL & ATTACH PAYSIP)
NRC NUMBER:	TEL:

**To: iSchool Zambia Limited**

I hereby apply for the items indicated below in accordance with the monthly instalment plan selected for each item and request that the amounts be recovered in the payroll run from \_\_\_\_\_ (indicate month).

No.	Description	Cash	3 months payment			6 months payment		
			Price	Qty	Total	Price	Qty	Total
1	Home Tablet	1,800.00	2,050.00			2,500.00		
2	Pupil Tablet	1,800.00	2,050.00			2,500.00		
3	Keyboard case	180.00	200.00			220.00		
4	Home headsets	100.00	110.00			120.00		
5	Teacher tablet	2,280.00	2,490.00			3,390.00		
6	Projector (Only available with Teacher Tablet)	4,200.00	4,660.00			5,120.00		
7	Battery for projector (If you have no electricity)	1,452.00	1,600.00			1,770.00		
8	Solar Charger (Only available with Tablet)	860.00	950.00			1,050.00		
9	Internet Router	480.00	530.00			585.00		
10	Bumper	100.00	110.00			120.00		
	<b>TOTAL</b>							

I certify that the details supplied above are correct and mandate iSchool Zambia to submit the details for payroll deduction for the amount indicated.

Signature of Applicant: ..... Date: .....

**PART II**

(To be completed by Verifying Officer in Human Resources or Administration)

I have verified the officer's details and DO/DO NOT recommend for him/her to get the items under this scheme at this time.

Signature of Verifying Officer ..... Date: .....

Name: ..... Official Stamp