FORM 6 (r. 14(1)(a))

APPLICATION FOR EXEMPTION FROM REGISTRATION AS AN INTERNATIONAL PUBLIC BENEFIT ORGANIZATION

PART 1: IMPORTANT NOTES TO BE READ BEFORE COMPLETING THE FORM

1. This form is to be completed by any organization seeking exemption from registration
2. You can only apply for registration as an Exempt organisation if your organisation does not intend to directly implement activities or programmes in Kenya or raise any subscriptions or engage in any other form of raising of funds in Kenya.
3. Furnish the Authority with the complete governance structure of your organisation.
4. Please note that some of the information you give in this application will be publicly available in the Public Benefit Organisations Register.
5. Applicants must meet the public benefit test to be registered which requires that the organisation:
   a. Its activities must provide public benefit
   b. Its constitution must not allow its property to be distributed or applied for non-charitable purposes
   c. It must not confer private benefit through its activities
   d. There should be no undue restrictions in accessing the benefits offered by the Organisation.

PART 2: PARTICULARS OF THE PROPOSED PUBLIC BENEFIT ORGANIZATION

NAME AND GOVERNANCE STRUCTURE

1. Name of Organization
   ……...……
2. Governance Structure ☐ Membership ☐ Non-Membership
3. ADDRESS OF THE PROPOSED PUBLIC BENEFIT ORGANIZATION
   a) Physical Address of the proposed PBO
   b) County .....
   c) Subcounty .....
   d) Physical address .....
   e) Postal address……..…….… Postal code .....
   f) Organization's Phone number .....
   g) Email of the Organization .....

PART 3: REGISTRATION STATUS

4. Please state the country of registration of the organization

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5. Please state the public benefit /charity registration number of your parent organization

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6. Contact details of the Parent Organisation

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PART 4: PUBLIC BENEFIT PURPOSES OF THE PROPOSED EXEMPT ORGANISATION

Public Benefit Purpose of the proposed PBO (*Your organization's purposes are usually set out in the objects, section of your constitution. The purposes say what your organization has been set up to achieve and reflect its broad aims rather than the day-to-day activities*).

7. The public benefit purposes in the Public Benefit Act 2013 are listed below. Please choose one that relates closest to your charitable purposes.

(i) Agriculture

(ii) Children

(iii) Culture

(iv) Disability

(v) Energy

(vi) Education

(vii) Environmental &Conservation

(viii) Gender

(ix) Governance

(x) Poverty Eradication

(xi) Health

(xii) Housing &Settlement

(xiii) Human Rights

(xiv) HIV/AIDS

(xv) Information

(xvi) Informal sector

(xvii) Legal Aid

(xviii) Old Age
(xix) Peace Building
(xx) Population & Reproductive Health
(xxi) Refugees
(xxii) Disaster prevention, preparedness and mitigation
(xxiii) Relief
(xxiv) Pastoralism and marginalized communities
(xxv) Sports
(xxvi) Water and sanitation
(xxvii) Animal welfare
(xxviii) Youth

8. State your public benefit purpose as indicated in your constitution

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9. Please list your specific objectives (Ensure that they contribute directly to the main objective)
   (a) ----------
   (b) ----------
   (c) ----------

PART 5: COUNTRIES OF OPERATION

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PART 6: FINANCIAL YEAR

Financial year (this is a 12-month period for example January to December) .....

PART 7: PARTICULARS OF DIRECTORS AND OFFICIALS (Please note that the organization must have a minimum of five directors one-third of whom must be Kenyans who are resident in the country to be registered)

1. Director

Name .....

Position .....

Nationality .....

Passport No .....

Phone number .....

Email .....

Signature .....

2. Director

Name .....

Position .....

Nationality .....

Passport No .....

Phone number .....

Email .....

Signature .....

3. Director

Name .....

Position .....

Nationality .....

Passport No .....

Phone number .....

Email .....

Signature .....

PART 8: PARTICULARS OF THE AUTHORIZED AGENT (The Authorised Agent must be a Kenyan Citizen retained by the Organization upon whom official notices, summons and other processes may be served)

Name .....

Gender .....

ID Number .....

KRA Pin .....

Phone Number .....

Email Address .....

Physical address .....

Postal address .....

Postal code .....

Nationality .....

Educational Qualifications .....

Profession/Occupation .....

Signature .....

DATA PROTECTION STATEMENT

Any information you provide will be held securely and in accordance with Article 31 of the Constitution of Kenya and the statutory laws on data protection. Selected information will appear on the Public Benefits Organizations Register in accordance with Section 15 of the Public Benefits Organizations Act.

The Authority, in compliance with Section 25 (5) of the PBO Act 2013, shall ensure that the activities of public benefit organizations are open and accessible to scrutiny by their respective stakeholders upon request, except for personal matters and proprietary information.

DECLARATION

It is an offence to give an answer that you know is untrue or misleading.

I certify that the information entered in this form is correct to the best of my knowledge.

Signed by one of the Directors

Name: .....

Designation: .....

Signature: .....

Date: .....