



AMAZING FRIENDS for DEVELOPMENT ASSOCIATION

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AFRIDA MEMBER EXIT FORM

NOTES

1. Withdrawing members must ensure:
 - a) All loans guaranteed are replaced by submitting duly filled Substitution of Guarantors form.
 - b) All loans owed to the Sacco are cleared
2. Withdrawal process takes 15 (Fifteen) calendar days
3. Share capital shall not be refunded but is transferable. (**Attach a filled transfer form**)
4. Savings can be withdrawn or transferred. (**Attach a filled withdraw form**)

PERSONAL DETAILS:

NAME:.....MEMBERSHIP CODE:.....CELL:.....
EMAIL:.....TEL NO.:

Section A: EXIT INTERVIEW (To be conducted by SG)

We value your feedback, kindly fill out the questionnaire below to help us improve our services:

1. Kindly explain the reason(s) for leaving.

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2. What are your key takeaways from your experience with AFRIDA?

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3. What areas do you think AFRIDA could improve?

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4. If you have an opportunity in future, would you rejoin AFRIDA?

☐ Yes

☐ No

If NO, please explain:

.....

5. Are you likely to refer other people to AFRIDA?

☐ Yes

☐ No

If NO, please explain:

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Section B: EXIT INTERVIEW (To be Conducted by SACCO Chairperson)

6. What did you like about AFRIDA Sacco?

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7. **Guarantorship:** I had guaranteed the following members whose loans are still not yet paid in full and have been replaced by the following:

Member Guaranteed	Membership Code	Replaced by	Membership Code

8. Do you have any SACCO-related concerns or feedback?

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Section C: EXIT INTERVIEW (To be Conducted by President)

9. Can you share one moment or activity you found especially meaningful?

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10. What would have encouraged you to continue your membership?

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11. Would you be open to participating in AFRIDA activities in a non-member capacity (e.g., volunteer, advisor)?

☐ Yes

☐ No

CONFIRMATION

I confirm that the information provided is true. I agree to abide by the By-Laws and any other rules and regulations applicable.

SIGNATURE:

DATE:.....

FOR OFFICIAL USE ONLY

	Name	Signature & Date	Remarks
SG			
SACCO Chairperson			
President			