

Promoting Free, Responsible and Accountable Media

APPLICATION FORM FOR REGISTERING A NEW MEDIA ORGAN IN RWANDA

1. INFORMATION OF THE OWNER

Name of the owner		
Address	Province	
	District	
	Sector	
	Cell	
ID Number:		
Phone Number:		
E-mail address :		
Website:		

2. INFORMATION OF THE CHIEF EDITOR

Name of the chief editor		
Address	Province	
	District	
	Sector	
	Cell	
ID Number:		
Press Card Number:		
Phone Number:		
E-mail address :		

3. INFORMATION OF JOURNALISTS

JOURNALIST N°1

Name of the journalist		
Address	Province	
	District	
	Sector	
	Cell	
ID Number:		
Press Card Number:		
Phone Number:		
E-mail address :		

JOURNALIST N°2

Name of the journalist		
Address	Province	
	District	
	Sector	
	Cell	
ID Number:		
Press Card Number:		
Phone Number:		
E-mail address :		

4. COMPANY INFORMATION

Name of the media organ	
Periodicity	
Language	
District	
Sector	
Cell	
Village	

5. DECLARATION

I hereby certify that information supplied in this form is true in all aspects

Name of Applicant:

Signature:

Date:/...../.....

6. DOCUMENTS TO BE ATTACHED

- i. Application letter addressed to the Chairman of Rwanda Media Commission
- ii. Detailed CV, a copy of ID and accreditation card of the chief editor
- iii. Criminal Records certificate for chief editor
- iv. Copies of accreditation cards for the two journalists
- v. Employment contracts of the Chief editor and the 2 journalists
- vi. Editorial line
- vii. Business plan of 3 years
- viii. Certificate of domestic company registration by RDB
- ix. Receipt of 50,000 FRWS (Registration fee) paid at Bank of Kigali.

Account number: **00042-0652725-03**