



**MINISTRY OF AGRICULTURE, LIVESTOCK & FISHERIES  
STATE DEPARTMENT OF AGRICULTURE  
KCEP CRAL -WESTERN REGION**

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SOILO – NAKURU  
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Ref: Ref: MOALF/KCEP/W/ 1/3/ VOL.1 /(084)

**FARMER GROUPS PROFILE AND COMMITMENT FORM**

**A. BACKGROUND INFORMATION**

<b>Name of group</b>	
<b>Name of County</b>	
<b>Name of the Sub-county</b>	
<b>Name of the Ward</b>	
<b>Name of Responsible Frontline extension worker</b>	<b>Name</b> ..... <b>ID/No</b> ..... <b>P/No</b> ..... <b>Mobile No</b> .....
<b>Village/location</b>	
<b>Contacts of appointed Group leader</b>	<b>Name</b> ..... <b>Mobile No</b> .....

**By signing this form, each group member agrees to abide by KCEP-CRAL guidelines which includes:**

- Inputs received must be used as recommended for the intended purpose
- Willing to be a member of a group of 20-25 farmers
- The group of 20-25 farmers will be linked to one agro-dealer for self-monitoring by the group in terms of collection of inputs and their utilization
- Participate in all trainings including financial literacy organized by the programme
- Ability to provide land labour for timely land activities
- Abide to group by-laws to counter defaults; The by-laws will be formed by the group
- Willing to use aggregation/storage facilities for efficient marketing. (Aggregate a minimum of **five** 90Kg bags)
- Beneficiaries must be willing to engage in savings mobilization for sustainability

**NB: Any member not abiding by the set rules will be excluded from the group**

**The group agrees to abide by the KCEP-CRAL guidelines  
Names of group members**

NAME	M /F	AGE ≥(greater) 35 or ≤ (less than) 35 years	Role in group	PHONE NO.	ID	PLOT NO.	SIGNATURE
1.							
2.							
3.							
4.							
5.							
6.							
7.							
8.							
9.							
10.							
11.							

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<b>26.</b>							
<b>27.</b>							
<b>28.</b>							

**Signatures**

**INTERIM CHAIRMAN:**

**Name..... Signature.....**

**INTERIM SECRETARY**

**Name..... Signature.....**

**WAO:**

**Name.....Signature.....**