

PARTY LIST CANDIDATE APPLICATION FORM

The County Chairperson,

Having fully complied with Article 3(e) (IV) of the Party constitution and The Party Nomination rules, I hereby wish to be considered for nomination to the Party list for the upcoming general elections.

Position applied for:

County (for member of County assembly)

Name of Applicant Details:

Surname: Other names.....

ID/Passport No..... D.O.B: P. O. Box: Code:

Town: Tel: Email:

Gender:

County: Constituency:

Ward: Party Membership No.

I hereby solemnly swear to abide by the laid down Party electoral code of conduct and pledge of commitment if my candidature is approved.

Applicant signature..... Date:

Official use only:

County elections Board recommendations:

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Signed:

Chairman..... Secretary.....

Date..... Date.....

National Elections Board recommendations:

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.....
.....

Signed:

Chairman..... Secretary

Select the List you wish to participate in. Tick one.

1	Special Interest Group	
2	Persons with Disabilities	
3	Youth	
4	Marginalized Community	
5	Gender Top-up List	

Personal Profile

Provide a summary of why you are the best fit for the above list (less than 100 words).

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Provide a proposer and seconder. The proposer and seconder must be members of the KNC Party.

Proposer(s)

1	Full Names	National ID/Passport Number	Phone	KNC Membership No	Sign
2					
3					
4					
5					

Seconder(s)

1	Full Names	National ID/Passport Number	Phone	KNC Membership No	Sign
2					
3					
4					
5					

You can attach any evidence of participation in party activities on this form.

END