

**KENYA PAEDIATRIC ASSOCIATION**  
**NATIONAL ELECTIONS RULES**

**NOMINATION FORM FOR THE OFFICE OF:**

**DATE OF NATIONAL ELECTIONS:** THURSDAY 12<sup>TH</sup> MAY, 2022

**CANDIDATE’S NAMES (In full, as they should appear on the Ballot Paper):**

..... MP&DB Reg. No:.....

Address:

.....

.....

- I certify that I have paid ALL my Association’s dues, up to **31<sup>st</sup> December, 2021**certified Copy of original receipt attached
- I am willing to accept nomination and agree to stand for this post. If elected, I promise to uphold the honour, traditions and Rules of KPA to the best of my ability.
- I have not been convicted of any criminal offence

**Candidate’s Signature:**.....**Date:**.....

**Proposer’s Names (In Full):**..... MP&DB Reg. No:.....

Address:

.....

.....

I certify that I have paid ALL my Association’s dues, up to **31<sup>st</sup> December, 2021** Certified Copy of original receipt attached

**Proposer’s Signature:**.....**Date:**.....

**Seconders’ Names (In Full):**..... MP&DB Reg. No:.....:

Address:

.....

.....

I certify that I have paid ALL my Association’s dues, up to **31<sup>st</sup> December, 2021**Certified Copy of original receipt attached

**Seconders’ Signature:**.....**Date:**.....

**NOTE**

- All the present holders of National Offices are eligible to stand for those offices IF THEY HAVE NOT SERVED TWO CONSECUTIVE TERMS.
- A Copy of the Candidate’s “STATEMENT” and PASSPORT SIZE COLORED PHOTOGRAPH should be submitted with this Nomination form, for distribution to voters.
- Responsible canvassing is allowed as long as KPA facilities and staff are not involved.

**PLEASE RETURN THIS NOMINATION FORM TO:**

THE CHAIRMAN  
KPA NATIONAL ELECTIONS COMMITTEE  
P.O. BOX 45820-00100  
NAIROBI – GPO

**SO AS TO REACH THE KPA NATIONAL OFFICE NOT LATER THAN 13<sup>TH</sup> APRIL, 2022**