

APPLICATION FORM

FOR

NOMINATION OF A

COUNTY ASSEMBLY CANDIDATE

Orange Democratic Movement

**Orange House, Menelik Road,
Kilimani Area,
P.O Box 42242 – 00100
Nairobi
Tel: 020 2053481
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SCHEDULE 1

THE ORANGE DEMOCRATIC MOVEMENT

**APPLICATION FORM FOR NOMINATION OF
A MEMBER OF THE COUNTY ASSEMBLY**

(To Be Completed in Triplicate)

To: **SECRETARY
THE NATIONAL ELECTIONS BOARD
ORANGE DEMOCRATIC MOVEMENT P.O Box 42242 – 00100
NAIROBI**

PART A

I, do hereby apply to be nominated as the Orange Democratic Movement Member of the County Assembly candidate to contest in the forthcoming By- Elections in **North Kadem** Ward, **Nyatike** Constituency, **Migori** County.

- 1. **Party Membership No**
- 2. **Electors Card No**
- 3. **National Identity Card No**
- 4. **Physical Address**.....
- 5. **Postal Address**.....
- 6. **Telephone**.....
- 7. **Email Address**.....
- 8. **Sub location**.....
- 9. **Ward**.....
- 10. **Constituency**.....
- 11. **County**.....

PART B: PARTICIPATION IN PARTY AFFAIRS AND PROGRAMMES

- 1. What is your Party Membership No?
- 2. Provide evidence of your performance in the political party management in your ward?
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3. Are you a member of any organ of the party?
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4. Please demonstrate your ability to articulate any two objectives of the party manifesto
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5. Briefly state your commitment and passion to the party, its ideology, policies and programs.
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6. Can you be described as a disciplined and dependable party member? Please illustrate in two hundred and twenty words.
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PART C:

1. Demonstrate your capacity to mount a successful County Representative campaign and mobilize for the party to win in the General elections.
- 2.
- Have you ever been elected in any civic authority YES/NO
 - Have you ever served on a civic authority committee YES/NO
 - Have you ever participated in promoting democracy YES/NO

PART D: LEADERSHIP AND INTEGRITY

- 1) Are you a State and/or Public Officer (if you have been a Public Officer, show evidence of resignation)?
- 2) Have you at any time within five years immediately preceding the date of election, held office as a member of a Commission?
- 3) Have you been a Citizen of Kenya for at least ten years immediately preceding the date of elections?
- 4) Have you ever been declared bankrupt?
- 5) Have you ever been convicted in a court of law on a criminal offence?
- 6) Have you ever been found guilty in a court of law for abuse or misuse of a state or public office or in any way to have contravened Chapter six of the constitution?

PART E

Please submit your application with the following

- 1) A Non-refundable nomination fee of Kenya Shillings Twenty Five Thousand (Ksh. 25,000) payable by Bankers Cheque to Orange Democratic Movement, or ODM Pay Bill No.- **985900**
- 2) A detailed Curriculum Vitae indicating amongst other qualifications the following: -
 - a) Education qualifications.
 - b) Certificate of Secondary education
 - c) Certificate of Post secondary education
- 3) A copy of your National Identification Card
- 4) A copy of your Elector's Card
- 5) A copy of your Orange Democratic Movement Life Membership Certificate
- 6) Duly completed, signed and witnessed Code of Conduct Form;
- 7) Duly completed, signed and witnessed Pledge of Commitment Form;
- 8) Please submit the following documents
 - a) Tax clearance certificate from KRA
 - b) Certificate of good standing (if a member of a Professional body).
 - c) Letter of clearance from HELB (if graduate of any Kenya Public University)
 - d) Certificate of good Conduct

PART F

- 1) I confirm I have not sought Nomination from any other registered Political Parties
(YES/NO)

- 2) I confirm that I have revoked my nomination by other registered Political Parties which
I had earlier on sought nomination
(YES/NO)

Candidate to tick (YES/NO) whichever is applicable.

Dated At.....This.....Day of2016

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SIGNATURE

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FULL NAMES OF CANDIDATE

NB: *Please submit your application with a copy of the receipt for the application fees duly paid.*

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For Official Use only

Information Verified By:Date.....

Received at the Party Headquarters.....Date.....

Approved By Date

Compliance Certificate No.Issued On