

SERIAL NO. DAP-K/NEB/2025/.....



THE DEMOCRATIC ACTION PARTY - KENYA

NOMINATION APPLICATION/ DECLARATION FORM

(To Be Completed in Triplicate)

To: CHAIRMAN

THE NATIONAL ELECTIONS BOARD

DEMOCRATIC ACTION PARTY - KENYA

P.O BOX 10459 – 00100

NAIROBI

THE DEMOCRATIC ACTION PARTY – KENYA NOMINATION APPLICATION/ DECLARATION FORM

PART A

POSITION BEING VIED FOR

I hereby make application to DEMOCRATIC ACTION PARTY-KENYA to vie for position of.....

PERSONAL INFORMATION

This form should be filled in by the candidate when he/she is contesting in party nominations.

1. FULL NAME:.....
2. CAMPAIGN NAME (IF ANY):.....
3. GENDER:.....
4. DATE OF BIRTH:
5. ID/PASSPORT NUMBER:
6. VOTER REGISTRATION NUMBER:
7. COUNTY:
8. CONSTITUENCY:
9. WARD:
10. POLLING STATION:

11. DAP-K MEMBERSHIP NO:
12. TELEPHONE NUMBER:
13. OTHER CONTACT:
14. EMAIL ADDRESS:
15. HAVE YOU EVER CHANGED YOUR NAME? YES NO
- (IF YES) PREVIOUS NAME FROM (YEAR) TO (YEAR):



PROFESSIONAL DESIGNATION

LIST ALL THE PROFESSIONAL DESIGNATIONS THAT YOU HAVE AND PROFESSIONAL ASSOCIATIONS TO WHICH YOU BELONG (EXAMPLE- LAW SOCIETY OF KENYA, KENYA INSTITUTE OF MANAGEMENT)

ASSOCIATION:

FROM (YEAR)..... TO (YEAR).....

EDUCATION HISTORY

LIST YOUR EDUCATION HISTORY (STARTING FROM THE HIGHEST QUALIFICATION ATTAINED)

INSTITUTION:

QUALIFICATION:

OBTAINED FROM..... (YEAR) TO..... (YEAR)

INSTITUTION:

QUALIFICATION:

OBTAINED FROM..... (YEAR) TO..... (YEAR)

INSTITUTION:

QUALIFICATION:

OBTAINED FROM..... (YEAR) TO..... (YEAR)

INSTITUTION:

QUALIFICATION:

OBTAINED FROM..... (YEAR) TO..... (YEAR)

PART B: PARTICIPATION IN PARTY AFFAIRS AND PROGRAMMES



1. Are you a Life Member of the party? What is your Life Membership No?

2. Provide evidence of your participation in the management of party affairs in your Branch/Sub

Branch/Ward?

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3. Are you a member of any organ of the party?

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PART C: DOCUMENTATION

Please submit your application with the following

1. A detailed Curriculum Vitae.
2. Two Passport Size Photographs.
3. A copy of your National Identification Card
4. Ethics and anti-corruption commission (EACC) certificate
5. Certificate of Good Conduct from DCI
6. Academic certificates
7. A copy of your Elector's Card

8. A copy of your DEMOCRATIC ACTION PARTY-K Life Membership Certificate
9. Duly completed, signed and witnessed Code of Conduct Form;
10. Receipt for payment of the nomination fees



PART D: DECLARATION

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 of..... 2022

FULL NAMES OF CANDIDATE:

SIGNATURE:

NB: No applications will be accepted without ALL the documentation required.

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For Official Use only

Information Verified By: Signature: Date:.....

Received at the Party Headquarters By: Signature..... Date.....

Approved By Signature..... Date

Compliance Certificate No. Issued On