

NOMINATION APPLICATION FORM

Pursuant to our By Laws as read together with section 28 of the Cooperative Societies Act Cap 490 of the Laws of Kenya, this serves as the nomination form as outlined by our nomination and electoral policy.

What position are you applying for?	
Board	
Supervisory	
Electoral Zone - Editorial Advertising Finance & Circulation	Mwananchi
Applicant's Name:	
ID NO:	
Member NO:	
Email:	
Signature: Date:	
This is to confirm that I have attached the below documents.	
Current curriculum vitae (CV)	
Certified Copies of your certificates and other testimonials	
Certificate of Good conduct (Not older than 6months)	
Current Credit Reference Bureau clearance certificate	
Copy of Identification Card	
Current Tax Compliance Certificate	
A copy of personal Identification Number (PIN)	



Additional Information

(a)	Are you a Board member of another Co-operative Society?
	□ YES
	□ NO
(b)	Have you ever been convicted of any offence involving dishonesty or imprisonment for three
	months or more?
	□ YES
	□ NO
(c)	Have you ever been named in an inspection report or an enquiry by either the authority or the
	commissioner?
	□ YES
	□ NO
(d)	AVAILABILITY. Will you be available for meetings and other programs aimed at promoting
	effective running of the society?
	□ YES
	□ NO
DECI	ARATION
I	accept and authorize publication of my
pers	onal profile by Nation Deposit Taking Sacco Society for knowledge of the membership during
and	after elections.
I also	o understand that my obligations with and related party dealings in the Society shall be disclosed
to th	e members annually without society seeking my approval.
I also	confirm that I have read, understood, and agree to be bound by the Co-operative Societies
Act 8	& Rules, Regulations, Society By-laws, Society policies and rules governing the nominations
and	election procedures in Society.
Car	ndidate's SignatureDateDate