



UNITED DEMOCRATIC MOVEMENT

Telephone: 0795958371 | 0795958279 | P. O Box 5267 - 00200 Nairobi.

NOMINATION APPLICATION FORM

This form should be completed in **TRIPPLICATE** by the candidate.

1. Elective position you are applying for (Tick as appropriate)	
Governor	
Senator	
Member of National Assembly	
Women Representative	
Member of County Assembly	

Specify your County, Constituency and Ward		
County	Constituency	Ward

Thanks for your interest in seeking Nomination in UNITED DEMOCRATIC MOVEMENT (UDM)

IMPORTANT NOTICE

- Completed application forms should be submitted to UDM Headquarters, Mijikenda Road, Lavington – Nairobi. **Deadline for submission will be on 12th Sep 2025 at 5pm.**
- Accompany this application form with the following documents – (i) Duly Signed EACC Clearance Certificate (ii) Certificate of Good Conduct (iii) Helb Clearance Certificate (iv) KRA Tax Compliance Certificate (v) CRB Clearance Certificate (vi) Copy of National Identity card (vii) Copy of party membership card, (viii) Educational certificates and all other documents required as per the election act (ix) Passport Photos
- Ensure you comply with all requirements as set out by the Independent Electoral Boundaries Commission and such other relevant regulation that may be in force.

SELF-DECLARATION FORM

1. GENERAL INFORMATION						
TITLE		SURNAME		FIRST NAME	MIDDLE NAME	OTHER NAMES
Mr./Mrs./Prof/Miss/Ms/Dr.						
NATIONAL IDENTITY CARD NO.		PASSPORT NO.		EXPIRY DATE OF PASSPORT		PIN NO.
GENDER	MALE	FEMAL	OCCUPATION			EMAIL ADDRESS
TELEPHONE NO.		MOBILE NO.		OTHER NUMBERS		
RESIDENCE		ESTATE/TOWN/LOCAT ION		POSTAL ADDRESS		P.O. BOX
		DISTRICT				CODE TOWN/CITY
2. BIRTH INFORMATION						
DATE OF BIRTH			BIRTH CERTIFICATE NO.		PLACE OF BIRTH	
DISTRICT OF BIRTH			COUNTY OF BIRTH		COUNTRY OF BIRTH	
3. NATIONALITY						
Kenyan		Dual	<input type="checkbox"/> (Provide details-----)			
4. MARITAL STATUS						
SINGLE <input type="checkbox"/>		MARRIED <input type="checkbox"/>		SEPARATED <input type="checkbox"/>		DIVORCED <input type="checkbox"/> WIDOWED <input type="checkbox"/>
IF MARRIED GIVE NAMES OF THE SPOUSE (S) (Surname, first name, middle name, Others)						
NATIONALITY OF SPOUSE						
NAMES OF CHILDREN UNDER THE AGE OF 18 YEARS						
5. EDUCATIONAL QUALIFICATIONS						
PRIMARY <input type="checkbox"/>		SECONDARY <input type="checkbox"/>		A' LEVEL <input type="checkbox"/>		CERTIFICATE <input type="checkbox"/> DIPLOMA <input type="checkbox"/> DEGREE <input type="checkbox"/>
MASTERS <input type="checkbox"/>		PHD <input type="checkbox"/>				
OTHERS -----						

HIGHEST ACADEMIC QUALIFICATION OBTAINED		
Qualification	Institution	Year
6. LANGUAGE SPOKEN		
First Language	Second Language	Other
7. MEMBERSHIP OF PROFESSIONAL ORGANIZATION (S) (IF ANY)		
Name of Organization	Date of Admission	Membership No.
8. MORAL AND ETHICAL QUESTIONS		
Answers to the following questions are mandatory. If YES to any question you must provide additional information on a supplementary sheet.		

	YES	NO
a) Have you ever engaged in any form of dishonesty in the conduct of public affairs?		
b) Have you ever abused a public office?		
c) Have you ever misrepresented information to the public?		
d) Have you ever engaged in wrongful conduct whilst in the furtherance of personal benefit?		
e) Have you ever misused public resources?		
f) Have you ever discriminated against anyone on any grounds other than as provided for under the Constitution or any other law?		

g) Have you ever falsified official or personal records?		
h) Have you ever been debarred or removed from the Register of Members of your Professional organization?		
i) Have you ever had any occupational or vocational license revoked and/or otherwise subjected to any other disciplinary action for cause in Kenya or any other country?		
j) Have you ever been dismissed from employment on account of lack of Integrity?		
k) If you have been a public officer, have you ever failed to declare your Income, Assets and Liabilities as required under the Public Officer Ethics Act.?		
l) Have you ever been the subject of disciplinary or criminal proceedings for Breach of the Public Officer Ethics Act. or a Code prescribed there under?		
m) Have you ever been convicted or any offence and sentenced to serve Imprisonment for a period of at least six months?		
n) Have you ever had an application for a Certificate of Clearance or a Certificate of Good conduct or for a visa or other document authorizing work in a public office denied and/or rejected for cause in Kenya or any other country?		

8. EMPLOYMENT INFORMATION

NAME OF EMPLOYER	POSITION/RANK	DATE OF FIRST APPOINTMENT	DATE OF PRESENT APPOINTMENT
WORK STATION	NATURE OF EMPLOYMENT (Constitutional/Elective/Permanent/Contractual/Other)		

9. PROPOSERS (MUST BE FROM THE AREA WHERE THE ASPIRANT IS SEEKING NOMINATION)

a) First Proposer

Name	Identity card No.	Signature

b) Second proposer

Name	Identity card No.	Signature

OATH AND AFFIRMATION

I solemnly swear (or affirm) and certify, under penalty of false declaration under the Oaths and Statutory Declarations Act (Cap. 15 of the Laws of Kenya), that all the foregoing statements in this declaration are true and correct to the best of my knowledge.

Dated at, this day of 20.....

SIGNATURE OF DECLARANT:

SWORN/DECLARED BEFORE ME

Thisday of20 at

Commissioner for Oaths/Magistrate

