

APPLICATION FORM

FOR

UPA PARTY GOVERNOR / SENATOR / MEMBER OF PARLIAMENT/ WOMEN REPRESENTATIVE / MEMBER OF COUNTY ASSEMBLY

FULL NAME	
POSITION VYING FOR	
COUNTY	
CONSTITUENCY	
WARD	

Kazi House Kileleshwa Area, Mandera Road, P. O. Box 40016 – 00100 Nairobi Tel: 0202333110 /0738333110

SECTION A: PERSONAL INFORMATION

I	, do hereby ap	pply to vie for the position	
of	in the upcoming	in the upcoming 2022 National Elections in	
	Polling Centre,	, Ward,	
	Sub- County,	County.	

Surname	
First Name	
Other Names	
Party Membership Number	
ID Number/ Passport No.	
PIN Number	
Email Address	
Mobile Number	
Gender	
PWD	
Marital Status	
Date of Birth	
Place of Birth	

1. Citizenship

- a. Are you a Kenyan Citizen
- b. How did you acquire your citizenship?
 - i. By birth
 - ii. By Registration
- 2. Profession: Briefly state your professional history:

3. Political History:

Have you held any political position? If so, state the position(s) held and the year(s) served.

4. Any other relevant information to support your application:

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SECTION C: ELIGIBILITY REQUIREMENTS

Please submit your application with the following documents 1. A Non-refundable Life Membership and Nomination Fees:

UNITE			
Aspirant	Life Membership Kshs	Nomination Fees Kshs	Special Interest Groups
Governor	20,000.00	300,000.00	225,000.00
Senator	20,000.00	250,000.00	185,000.00
Woman Representative	20,000.00	100,000.00	75,000.00
Member National Assembly	20,000.00	100,000.00	75,000.00
Member County Assembly	20,000.00	20,000.00	15,000.00

Payable by Bankers Cheque to United Progressive Alliance National Bank of Kenya Account Number 01020243712100.

Or Deposit to Mpesa: Pay Bill No. 625625; Account Number 01020243712100

Bank swift Code for international Bank Transfer: NBKEKENXXXX

- 2. A detailed Curriculum Vitae
- 3. Kenya National Qualifications Authority (KNQA) Certified copies of your educational certificates and testimonials
- 4. Copy of your National Identification Card
- 5. Copy of your UPA membership card
- 6. Duly signed Integrity and Leadership Form
- 7. Certificate of Good Conduct
- 8. Aspirant Endorsement Form.
- 9. Requisite Voter Endorsement Forms

For a complete list of eligibility qualifications and requirements please refer to UPA Aspirants' information form.

FULL NAME OF ASPIRANT:.....

SIGNATURE:..... DATE:....

N/B Please submit this application form and all accompanying documents in triplicate.

FOR OFFICIAL USE ONLY

Information Verified By:	Date
Received at the Party Headquarters	Date
Approved By	Date
Compliance Certificate No.	.Issued On