



NOMINATION APPLICATION FORM

1. I, holder of ID No..... and Personal No.....Do hereby present myself for nomination to contest the position of: - Member of Board of Directors/Supervisory Committee/Delegate/Branch Official of USHURU Co-op Saving and Credit Society Ltd. (Tick appropriately)

2. Current Station.....Branch

3. Member's Details

Member No.....

Date of joining.....

Year of birth.....

Shares/Deposits as at 31stDecember 20.....

Contact address.....

House Telephone No.....

Office Number.....

Mobile number.....

Employer Name.....

Terms of employment.....

Expiry date if contract.....

Current position at place of employment.....

Highest Academic qualifications.....

Highest Professional qualifications.....

Any other qualifications.....

4. Leadership positions held

Name of Organization	Position Held	From	To	Achievements

5. Declaration

I,..... accept and authorize publication of my personal profile by the society for the knowledge of the membership when elected on the board. I also understand that my obligations with and related party dealings in the Sacco shall be disclosed to the members annually without the society seeking my approval. I also confirm that I have read, understood and agree to be bound by the Society’s Act, Rules, Bylaws, Sacco policy and rules governing the nominations and election procedures in USHURU Sacco

Applicant’s SignatureDate.....

Witnessed by:Employer/Commissioner for Oath

I ,..... Title do hereby confirm that..... is an employee of in the Department

Signature.....Stamp.....Date.....