



Kenya Medical Association

Champion the Welfare of Doctors and Quality Healthcare in Kenya

ANNOUNCEMENT

2018 KMA NATIONAL ELECTIONS

Nominations for the following positions are currently underway:

1. Hon. National Chairman
2. Hon. National Vice-Chairman
3. Hon. National Secretary
4. Hon. National Treasurer

Interested candidate(s) to pick Nomination Forms from the KMA Centre (Chyulu Road, Upper Hill, Nairobi) or from his/her Divisional Chairman/Chairperson or download from the website www.kma.co.ke/kmaelections

**DEADLINE FOR SUBMISSION OF NOMINATION FORMS IS
TUESDAY
13TH MARCH 2018 – 5.00 P.M.**

**DR. NYAIM OPOT
CHAIRMAN, KMA ELECTORAL COMMITTEE**

For more information, please contact the Chairman, KMA Electoral Committee

NOMINATION FORM

FOR THE OFFICE OF: -----

CANDIDATE’S NAMES (In Full, as they should appear on the Ballot Paper):

.....KMA Membership No.:
Address:MP&DB Reg. No.:

- I certify that I have paid ALL my Association’s dues, up to December 31st, 2017. Certified Copy of Evidence of Payment
- I am willing to accept nomination and agree to stand for this post. If elected, I promise to uphold the honor, traditions and Rules of KMA to the best of my ability.
- I have not been convicted of any criminal offence (Rule 7.3.2 [b]).

Candidate’s Signature: **Date:**

Proposer’s Names (In Full): **KMA Membership No.:**
Address: **MP&DB Reg. No.:**

I certify that I have paid ALL my Association’s dues, up to December 31st, 2017. Certified Copy of original receipt attached (Rule 7.1.3).

Proposer’s Signature: **Date:**

Seconder’s Names (In Full): **KMA Membership No.:**
Address: **MP&DB Reg. No.:**

I certify that I have paid ALL my Association’s dues, up to December 31st, 2017. Certified Copy of original receipt attached (Rule 7.1.3).

Seconder’s Signature: **Date:**

NOTE

1. All the present holders of National Offices are eligible to stand for those offices IF THEY HAVE NOT SERVED TWO CONSECUTIVE TERMS.
2. A Copy of the Candidate’s “STATEMENT” and PASSPORT SIZE COLORED PHOTOGRAPH should be submitted with this Nomination form, for distribution to voters.
3. Responsible canvassing is allowed as long as KMA facilities and staff are not involved.
4. Full copy of election rules available from www.kma.co.ke

PLEASE RETURN THIS NOMINATION FORM TO:

THE CHAIRMAN
KMA NATIONAL ELECTORAL COMMITTEE
P.O. BOX 48502 – 00100
NAIROBI
KENYA

SO AS TO REACH THE KMA NATIONAL OFFICE (KMA CENTRE, 4TH FLOOR, CHYULU ROAD, UPPER HILL, NAIROBI) NOT LATER THAN 13TH MARCH 2018.