



## THE KENYA INSTITUTE OF PLANNERS

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### FORM E-01

#### NOMINATION PAPER

Election cycle / meeting (e.g., AGM): \_\_\_\_\_

Office sought (GC / Trustee / Other): \_\_\_\_\_

Candidate name (as per membership records): \_\_\_\_\_

Membership number: \_\_\_\_\_

Membership category: \_\_\_\_\_

Email: \_\_\_\_\_

Phone: \_\_\_\_\_

Candidate consent to serve if elected: YES / NO

Candidate signature: \_\_\_\_\_

Date: \_\_\_\_\_

Proposer (Name / Membership No. / Signature / Date) \_\_\_\_\_

Seconder (Name / Membership No. / Signature / Date):  
\_\_\_\_\_