

## REPUBLIC OF KENYA COUNTY ASSEMBLY OF MARSABIT THIRD ASSEMBLY- FIRST SESSION



## APPLICATION FORM FOR THE POSITION OF MEMBERS OF THE COUNTY ASSEMBLY SERVICE BOARD

Please complete all sections of this form as appropriate in **BLOCK** letters and submit to the Clerk, Marsabit County Assembly, Office of the Clerk, County Assembly Buildings, P.O. BOX 29 - 60500, MARSABIT, KENYA. (Attach copies of Identity Card, certificates and testimonials).

| 1. Vacancy A      | Applied For                               |                                |                                     |                                 |
|-------------------|---|--------------------------------|-------------------------------------|---------------------------------|
| Vacancy/Post:     | :   |                                |                                     |                                 |
| 2. Personal       | Details of the Ap                         | plicant                        |                                     |                                 |
| Name:             |   |                                |                                     | Title                           |
|                   | (Surname)                                 | (First Name)                   | (Other Name(s):                     | (Prof/Dr/Mir/Mrs./Miss/Ms./Rev) |
| Date of Birth     | (dd-mm-yyyy)                              | ID No:                         | PIN.NO                              | Gender: Male Female             |
| Nationality       | Ethn                                      | icity ŀ                        | Home                                |                                 |
| County:           |   |                                |                                     |                                 |
| Sub County        |   |                                |                                     |                                 |
| Postal Addres     | S   | Code:                          | Town/City:                          |                                 |
| Telephone No      | o:  | 1obile No:                     | E-mail address:                     |                                 |
|                   |   | n:                             |                                     |                                 |
| Are you living    | with a disability? Y                      | es No                          |                                     |                                 |
| If yes, give;     |   |                                |                                     |                                 |
| (i) Details/N     | lature of Disability:                     |                                |                                     |                                 |
| (ii) Details of I | Registration with the                     | National Council for People    | with Disabilities (Registration No. | and date)                       |
|                   |   |                                |                                     |                                 |
| 3. Other Per      | rsonal Details                            |                                |                                     |                                 |
| Have you eve      | er been convicted of                      | any criminal offence or a sub  | ject of probation order? Yes        | No                              |
| If Yes, state n   | nature of offence, the                    | year and duration of convict   | ion                                 |                                 |
|                   |   |                                |                                     |                                 |
|                   |   |                                | ployment? Yes                       | No                              |
| If Yes, State r   | eason (s) for dismiss                     | al/removal                     | effec                               | tive date(dd-mm-yyyy)           |
|                   | he above informati<br>considered on its c |                                | ar an applicant from employme       | nt in the Public Service. Each  |
|                   |   |                                |                                     |                                 |
| Our E-mail: info  | @marsabitassembly.go                      | o.ke website: www.marsabitasse | embly.go.ke                         |                                 |

|                   | ear        | University/<br>High School | Award/Attainment<br>(e.g. Masters,<br>Bachelors, Degree,<br>KCSE) | Cours  | e/Programme<br>PhD, MSc, BA,<br>el)  | Speciali<br>(e. g. Ec<br>Sociolo | zation/Subject<br>on, Maths,<br>gy e.t.c) | Class/Grade |
|-------------------|------------|----------------------------|---|--------|--------------------------------------|----------------------------------|---|-------------|
| From              | То         |                            |   |        |                                      |                                  |   |             |
|                   |            |                            |   |        |                                      |                                  |   |             |
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|                   |            |                            |   |        |                                      |                                  |   |             |
| F. C              | B : 1 1    | . //                       |   |        |                                      |                                  |   |             |
| 5 Current         | Registrat  | ion/Membership to          | Professional Bodie  | es     |                                      |                                  |   |             |
| Profession        | nal Body   | Membershi                  | o/Registration No.  |        | Membership<br>(e.g.<br>Associate, Fu |                                  | Date of                                   | Renewal     |
|                   |            |                            |   |        |                                      |                                  |   |             |
|                   |            |                            |   |        |                                      |                                  |   |             |
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|                   |            |                            |   |        |                                      |                                  |   |             |
| 6 Relevan         | nt Courses | and Training attend        | ded Lasting not Les   | s than | One (1) Week                         |                                  |   |             |
| 6 Relevan         | nt Courses | and Training attend        | ded Lasting not Les   | s than | One (1) Week                         |                                  |   |             |
| 6 Relevan<br>Year |            | and Training attend        |   |        | One (1) Week                         |                                  | Details a                                 | nd duration |
|                   |            |                            |   |        |                                      |                                  | Details a                                 | nd duration |
|                   |            |                            |   |        |                                      |                                  | Details a                                 | nd duration |
|                   |            |                            |   |        |                                      |                                  | Details a                                 | nd duration |
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|                   |            |                            |   |        |                                      |                                  | Details a                                 | nd duration |
|                   |            |                            |   |        |                                      |                                  | Details a                                 | nd duration |
|                   |            |                            |   |        |                                      |                                  | Details a                                 | nd duration |
|                   |            |                            |   |        |                                      |                                  | Details an                                | nd duration |
|                   |            |                            |   |        |                                      |                                  | Details and                               | nd duration |

Our E-mail: info@marsabitassembly.go.ke website: www.marsabitassembly.go.ke

| Year   |  | Designation/ Position  | Job Group/Grade<br>/Scale<br>Gross Monthly Salary<br>(Ksh.)   | Ministry/State Department/<br>Institution/ Organization |
|--|--|--|---|---|
| From   | То   |  | (1.0.11)  |   |
| (dd-mm-yyyy) (d  | d-mm-yyyy)   |  |   |   |
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| Declaration  |  |  |   |   |
|  | J  | ion.   |   |   |
|  | (dd-mm-yyyy)   |  | Signature of tl   | ne Applicant  |
| •  | (dd-mm-yyyy)   |  | Signature of tl   | ne Applicant  |
| : THE DOCUM  | (dd-mm-yyyy)   | COMPANY APPLICATIONS   |   | ne Applicant  |
| B: <b>THE DOCUM</b> I<br>e application I   | (dd-mm-yyyy)  ENTS TO ACC  MUST be acc   | COMPANY APPLICATIONS  companied by the following doc   | uments:   | ne Applicant  |
| B: THE DOCUMI e application I  1. A certific   | (dd-mm-yyyy)  ENTS TO ACC  MUST be acced copy of the   | COMPANY APPLICATIONS  companied by the following doc  ne National Identity Card or Pass  | uments:<br>port;  |   |
| e application I  1. A certified  | ents to acc<br>MUST be acceded copy of the Copies of the   | COMPANY APPLICATIONS  companied by the following document in the companied of the National Identity Card or Passible Academic Certificates and other   | uments:<br>port;<br>ner Certificate in support o  |   |
| B: THE DOCUMING application I  1. A certification I  2. Certified  3. Current  | ents to acc<br>MUST be acced copy of the<br>Copies of the  | COMPANY APPLICATIONS  companied by the following docenter National Identity Card or Passible Academic Certificates and otherwise Certificate from the Kenya R  | uments:<br>port;<br>ner Certificate in support o<br>evenue Authority (KRA);   |   |
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