

**KIGUMBA INTENSIVE SECONDARY SCHOOLS**

OLD STUDENTS’ ASSOCIATION (KISSOSA)

*P.O Box 30, Kigumba – Kiryandongo. (Tel: +256-773317907)*

*Office of the electoral commission*

21st Dec.2018

**FROM: THE CHAIRPERSON ELECTORAL COMMITTEE KISSOSA**

**TO: ALL THE OLD STUDENTS**

**RE: KISSOSA ELECTIONS**

Theoffice of the electoral commission of (KISSOSA) would like to inform the entire old students’ fraternity of Kigumba Intensive Secondary Schools that there is going to be an election of new executive members of KISSOSA on the 12th Jan.2019 at the main campus (Kigumba Intensive Secondary School).

**Interest forms are to be submitted for the following offices:**

1. The Chair Person.
2. The Vice Chairperson.
3. The Finance Secretary.
4. The General Secretary.
5. Rt. Hon. speaker
6. Organizing Secretary
7. The Publicity Secretary.
8. The Assistant Publicity Secretary.
9. Board of Governor’s Representative.
10. Two Historical Members’ Representative (A lady and a gentleman)
11. Two Sister Schools’ Representatives (A lady and a gentleman)

**Eligibility and qualification for electoral offices.**

1. Any full member of the association shall be eligible for any of the above offices.(He/she must have paid membership and subscription fee totaling to 15,000/=)
2. Only members of second year (for those still studying a diploma or degree course) and those who finished a course in any field of study at a diploma or degree level in various educational institutions shall be eligible for the office of the chair person, vice chairperson, general secretary, treasurer and the speaker.
3. All contestants for the above offices shall pay anon refundable fee as specified in the table below:

|  |  |  |
| --- | --- | --- |
| **S/No.** | **Post** | **Nomination fees** |
|  | Chair Person | 50,000/= |
|  | Vice Chairperson | 50,000/= |
|  | Finance Secretary | 50,000/= |
|  | General Secretary | 50,000/= |
|  | Board of Governor’s Representative | 50,000/= |
|  | Speaker | 50,000/= |
|  | Organizing secretary | 30,000/= |
|  | Publicity | 30,000/= |
|  | Assistant publicity | 20,000/= |
|  | Historical Members’ Representative | 20,000/= |
|  | Sister Schools’ Representatives | 20,000/= |

1. All contestants must not have any criminal record

NB: ***(i) Successful nominees (candidates) shall be issued with the program of the campaigns, rules and regulations.***

***(ii) Disqualification of any candidate shall occur if he/she acts or behaves contrary to the rules and regulations of the electoral commission.***

***(iii) By constitution, any current interim executive committee member who intends to contest must step down immediately before submitting his/her interest form.***

Thank you

Rt. Hon. Wahab Ali (0784 783 599)

Chairperson



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**CANDIDATURE INTEREST/NOMINATION FORM**

1. **KISSOSA ELECTIONS**
   1. **Candidate’s names (in capital letters):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
   2. **Year of study at intensive schools:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_campus\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
   3. **Current work place:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**(please state the organization/institution/company name)**

* 1. **Current responsibility at work place:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
  2. **Position contesting for in KISSOSA:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
  3. **Nominees:**

**Name contact**

**1. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**2. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**3. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**CANDIDATE’S DECLARATION**

**I \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_declare that the information given above is true and correct to the best of my knowledge**

**Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ contact \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**FOR OFFICIAL USE ONLY**

**Comment from the commission\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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**Name of Returning Officer Signature Stamp**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Please download this form, fill it and submit to (**[**kissosa@kigumbaintensivesec.ac.ug**](mailto:kissosa@kigumbaintensivesec.ac.ug) **or** [***enwoupeter@gmail.com***](mailto:enwoupeter@gmail.com)**) before 3rd Jan.2019**