AFFIDAVIT IN SUPPORT OF PERSONAL PARTICULARS

Particulars of Persons seeking election to the Office/Membership of:

PRESIDENT ☐  VICE PRES. ☐  GOV. ☐  DEP. GOV. ☐

SEN. ☐  REPS. ☐  SHA ☐  CHAIRMAN A/C ☐

VICE CHAIRMAN ☐  COUNCILLOR A/C ☐

*Tick as appropriate*

CONSTITUENCY: .............................................. CODE: ........................

STATE: ............................................................. CODE: ........................

FCT: ............................................................. CODE: ........................
Affidavit in support of particulars of persons seeking Election to the office of President, Vice President, Governor, Deputy Governor, Senate, House of Representatives, State House of Assembly, Chairman, Vice Chairman or Councilor of Area Council.

I, .................................................................................................................. hereby make oath and declare that I am the person seeking election into the office of ...................................................... in the .......................................................Constituency and the particulars given hereunder are correct, true and to the best of my knowledge.

PART A
Office contested for: ............................................................
Name of Constituency: .................................................. Code
Name of Political Party: .................................................. Party membership No.

(Please attach a copy of Party membership card)

PART B
A PERSONAL PARTICULARS
1. Surname (in Block Letters): ..........................................................
2. Other Names (in block letters) ..........................................................
3. Former name(s) ..........................................................................
4. Date of Birth ......................... Age .......(Candidate shall comply with the statutory age required for the elective office sought. Birthplace..........................................................................
5. Residential Address ......................................................................

...........................................................................................................................
6. Occupation .......................................................................................
7. Telephone No ................. E-mail Address..................................................
8. Are you a person with disability ..........................................................
9. Nationality ......................................................................................
10. Have you voluntarily in the past changed Nationality? YES ☐ NO ☐ if Yes, what was your former Nationality? ..........................................................
11. Have you voluntarily acquired citizenship of any other country? YES ☐ NO ☐ If Yes, which country? ..........................................................
12. Have you made a declaration of allegiance to that or any other country? YES ☐ NO ☐ If Yes, Specify the country ..........................................................

(Attach evidence)
C. SCHOOLS ATTENDED/EDUCATIONAL QUALIFICATIONS WITH DATES

Attach evidence of all educational qualifications

<table>
<thead>
<tr>
<th>S/N</th>
<th>SCHOOL</th>
<th>QUALIFICATION</th>
<th>YEAR</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>PRIMARY</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>SECONDARY</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>HIGHER</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

D (I) WORKING EXPERIENCE WITH DATES

<table>
<thead>
<tr>
<th>NAME OF EMPLOYER</th>
<th>PERIOD OF WORK</th>
<th>REASONS FOR LEAVING (PLEASE ATTACH EVIDENCE)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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</tbody>
</table>

(ii) Have you ever been dismissed from the Public Service of the Federation, State or Local Government/Area Council? YES ☐  NO ☐  If Yes, give details

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E GENERAL

1. Have you ever been adjudged a lunatic or declared to be of unsound mind?
   YES ☐  NO ☐  If Yes, give details

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2. Are you under a sentence of death, imprisonment or fine, for any offence involving dishonesty or fraud or any offence imposed by a Court or Tribunal? YES ☐  NO ☐  If Yes, give details.

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3. Have you in the last ten years been convicted and/or sentenced for an offence or dishonesty?
   YES ☐  NO ☐  if Yes, give details.

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4. Have you ever been involved in any bankruptcy proceedings? YES ☐ NO ☐ If yes, give details.

5. Have you ever been convicted by the Code of Conduct Tribunal? YES ☐ NO ☐ If Yes, give details

6. Have you ever presented forged Certificate(s) to INEC? YES ☐ NO ☐ If Yes, give details.

7. Do you or have you ever belonged to a Secret Society? YES ☐ NO ☐ If Yes, give details.

8. Give any information about your person
F. DECLARATION BEFORE A COMMISSIONER FOR OATHS IN THE HIGH COURT

I hereby declare that all the answers, facts and particulars I have given in this Form are true and correct, and I have, to the best of my knowledge, fulfilled all the requirements for qualification for the office I am seeking to be elected.

__________________________________________________________
DEPONENT

Sworn to at the (State/High Court) Registry .................................................................

This ........................................Day of.................................................................20...........................................

BEFORE ME

__________________________________________________________
COMMISSIONER FOR OATHS
ACKNOWLEDGMENT

This is to acknowledge the receipt of **Form EC 9** from:

__________________________________________________________________________

(Party)

in favour of

__________________________________________________________________________

(Name of Candidate)

for the office of

__________________________________________________________________________

Received by me, at

__________________________________________________________________________

this ______________ Day of _____________________ 20______________

__________________________________________________________________________

Stamp/Signature of Receiving Officer

Name: _________________________________________

Rank: ___________________________________________