



# INDEPENDENT NATIONAL ELECTORAL COMMISSION

Plot 436 Zambezi Crescent, Maitama District, Abuja

## 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.

Affix Passport  
Photograph

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*

S/N	SCHOOL	QUALIFICATION	YEAR
1	PRIMARY		
2	SECONDARY		
3	HIGHER		

**D (I) WORKING EXPERIENCE WITH DATES**

NAME OF EMPLOYER	PERIOD OF WORK	REASONS FOR LEAVING (PLEASE ATTACH EVIDENCE)

(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

.....

.....

.....

.....

**E GENERAL**

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

.....

.....

.....

.....

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.

.....

.....

.....

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

.....

.....

.....



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