

NOMINATION FOR NATIONAL HONOURS FORM

(Please read the notes hereunder carefully before completing the form)

PART A: NOTES

- 1. This form is issued free of charge.
- 2. All contents on this form must be filled in BLOCK LETTERS.
- 3. The citation (grounds for recommendation) must be precise and clear.
- 4. All sections of this form must be completed.
- 5. Where the nominating person or body is not the final authority, the person or body may submit the nomination to the confirming officer. This may be the case, for example, in the Ministry where the Principal Secretary is not the nominating officer.
- 6. Recommendations may be submitted any time during the course of the year.
- 7. The information contained in this nomination form is strictly confidential and will not be communicated to any unauthorized person.
- 8. If the space is insufficient, provide additional information on a separate page and attach it to this nomination form
- 9. Please note that this is just a nomination which is not a guarantee for conferment of the national honours.
- 10. Upon completion of this nomination form, please send it and any enclosures thereto to:

The National Honours and Awards Committee Office of the Deputy President Harambee House Annex P.O Box 74434-00200 Nairobi

Telephone: +254-20-3247000

PART B: INFORMATION ON THE NOMINEE

1. Title (e.g. Mr. Mrs, Miss, Ms, Dr, Prof. Hon.etc)
2. Surname
3. Other Names
4. Position/ Title/ Rank (If any)
5. ID/Passport Number
6. Date of Birth
7. Nationality County of Birth (if Kenyan)

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MINATING PERSON/BODY akes them stand out from others and number of different areas;

b) Please list the posts or engagements, with start and end dates, in which the nominee has excelled:
c) Please list any other ways in which the nominee's contribution has been recognized elsewhere (for example in the media, by other awards, professional/interest groups)
2. Recommended honour:
PART D: DETAILS OF PERSON/BODY MAKING THE NOMINATION
1. Title (e.g. Mr. Mrs, Miss, Ms, Dr, Prof etc)
3. Other Names
4. Designation/Rank (where applicable)
Post code. Email Address
I confirm that the information given above is true to the best of my knowledge and understanding
Signature Date

PART E: FOR OFFICIAL USE ONLY Recommendation Award Signature (Chairman)