



*Setting gold standards in nutrition and dietetics*

KNDI/CEO/FACULTY/19/07/18(1)

Friday, September 14, 2018

To  
All Professionals

**RE: NOMINATION OF CONTESTANTS FOR COUNCIL MEMBER UNDER Paragraph (b) of Cap 253B**

KNDI is completing the legal processes of filling positions in the Council as per Section 5(2). Paragraph [b] requires that four other nutritionists or dieticians, at least two of whom shall be women, elected in the manner set out in the First Schedule.

A compliant professional who is interested to contest under this paragraph should forward his/her name accompanied by at least 10 nominations from compliant professions.

Please find nomination form attached to the letter.

Dr. David Omondi Okeyo, MSc., PhD., MPH., RPHNS  
**CHIEF EXECUTIVE OFFICER AND SECRETARY TO THE COUNCIL**

Copy to:

**CABINET SECRETARY  
MINISTRY OF HEALTH,  
AFYAHOUSE, CATHEDRAL ROAD**

**DR. EVAYLINE M. NKIRIGACHA, PHD  
KENYA NUTRITIONISTS AND DIETICIANS INSTITUTE  
CHAIPERSON**



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Chief Executive Office  
[ceo@kndi.institute](mailto:ceo@kndi.institute)

Cap 253B

An Act of Parliament to provide for the training, registration and licensing of nutritionists and dieticians; to provide for the regulation of the standards, and practice of the profession; to ensure their effective participation in matters relating to nutrition and dietetics, and for connected purposes

[Act No. 18 of 2007,  
L.N. 130/2008.]

Kindly use the official emails indicated on the left when giving reply through email when replying this email. Hard copy mails should be Addressed strictly to the Chief Executive Officer and Secretary to the Council. Mails addressed confidentially to the CEO should be marked confidential.

**NOMINATION PAPER FOR PROFESSIONL UNDER PARAGRAPH-b OF Cap 253B ELECTIONS**

We/I hereby nominate .....  
 Reg. No ..... a member of the Institute in good standing to contest for an election  
 as a professional representative under Paragraph b of the Act.

**DETAILS OF NOMINEE.**

Full Name: .....  
 Address: .....  
 Designation .....  
 Gender .....  
 Region..... (Nyanza, Western, Nairobi, Coast,  
 North Eastern, Central, Eastern, Rift Valley)  
 County.....

Name of Person Nominating	College	Reg No.	License S. No.	Signature

**NOTE**

I hereby accept the nomination

Name: ..... Signed .....

REG. NO ..... DATE: .....

Note:

#Duly filled forms should be submitted to the Presiding officers at Kenya Nutritionists and Dieticians Institute by 21<sup>st</sup> Friday 2018 at 5.00pm. Elections will take place on **Monday 24<sup>th</sup> September 2018.**

