



INDEPENDENT NATIONAL ELECTORAL COMMISSION

EC 9E

Plot 436 Zambezi Crescent, Maitama District, Abuja

SUBMISSION OF NAMES OF CANDIDATES BY POLITICAL PARTY

20.20.. STATE HOUSE OF ASSEMBLY ELECTION

SOKOTO STATE

POLITICAL PARTY ALL PROGRESSIVES GRAND ALLIANCE.

S/N	CONSTITUENCY	NAME OF CANDIDATE	AGE	SEX	PWD	ADDRESS	EDUCATIONAL QUALIFICATION(S)	REMARKS
1	KEBBE	SHEHU MAGAJI	56	M		SHIYAR AJIYA KEBBE	FSLC, SSCE, NCE.	
2								
3								
4								

SIGNED:

[Signature]
National Chairman

SIGNED:

[Signature]
National Secretary

- * Please attach sworn affidavit (EC 9) of each candidate.
- * Political parties shall mandatorily sponsor candidates who satisfy the statutory age qualification required for respective elective office(s).



EC 9

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 ☒ CHAIRMANA/C ☐
VICE CHAIRMAN ☐ COUNCILLORA/C ☐

Tick as appropriate

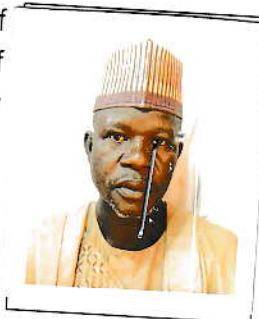


CONSTITUENCY: KEBBE CODE:

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

PART A

Office contested for: STATE ASSEMBLY
 Name of Constituency: KEBBE Code:
 Name of Political Party: A.P.C.A Party membership No.
 (Please attach a copy of Party membership card)

PART B

A PERSONAL PARTICULARS

1. Surname (in Block Letters): MAGAJI
2. Other Names (in block letters) SHEHU
3. Former name(s) NIL
4. Date of Birth 1964 Age 56 YRS (Candidate shall comply with the statutory age required for the elective office sought. Birthplace KEBBE
5. Residential Address SHIYAR AJIYA KEBBE
6. Occupation FARMER
7. Telephone No 08145281040 E-mail Address
8. Are you a person with disability NO
9. Nationality NIGERIAN
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	KEBBE TOWN PRY SCH	71-77
2	SECONDARY	G.T.C. WASAGU	78-85
3	HIGHER	S.S.C. O. E SOX	04-09

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.
-



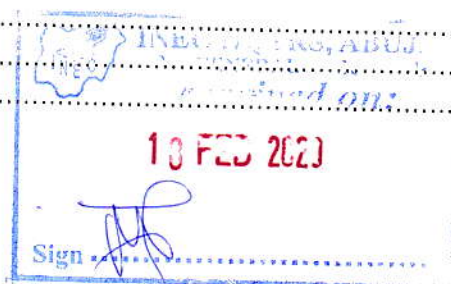
4. Have you ever been involved in any bankruptcy proceedings? YES ☐ NO ☒ If yes, give details.

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 I am a simple man
leading with people harmoniously.





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 High Court Registry, Sugar, Sufu

This 17 Day of 2 20 2

BEFORE ME



COMMISSIONER FOR OATHS.

PAID

Ans w: 10/1/2023




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: _____





SOKOTO STATE OF NIGERIA

SOS 0131

No.

CERTIFICATE OF PRIMARY EDUCATION
(Revised 1974)

Name: SHEHU MAGATI KEBBE
Approximate Date of Birth: 1st OCT 1964
Tribe: HAUSA
Birth Place and Division: KEBBE
Name of Parent or Guardian and his Occupation: MALLAM MAGATI KEBBE

	Details of Schools Attended				Year
Primary 1 ...	KEBBE TOWN PRIMARY SCHOOL				1970
Primary 2 ...	71	71	71	71	1971
Primary 3 ...	71	71	71	71	1972
Primary 4 ...	71	71	71	71	1973
Primary 5 ...	71	71	71	71	1974
Primary 6 ...	71	71	71	71	1975
Primary 7 ...	71	71	71	71	1976

This is to certify that the pupil named above has completed the year 19..... in Class 7 with a minimum of 75 percent attendances.

Order of merit, final year: 3rd HEADMASTER REPORT place out of 35

1. English Good Average Weak
2. Arithmetic Good Average Weak
3. His strong subjects (if any) are ENGLISH ARITHMETIC

4. Outdoor activities FOOTBALL

5. Sense of responsibility Good Average Weak
6. Points of responsibility held TIME KEEPER

7. Industry WILL

8. General Conduct GOOD

* Strike out words not applicable.

Signature of Pupil: SHEHU MAGATI KEBBE

Date: Sept 17 1977

Date: 17/9/1977

* State whether Pupil is Able to Read, Write, etc.

Signature of Headmaster: M. G. B.

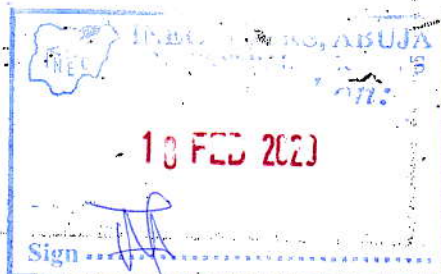
Signature of proprietor or his Representative: M. G. B.

Signature of Pupil: SHEHU MAGATI KEBBE

Signature of Pupil: SHEHU MAGATI KEBBE

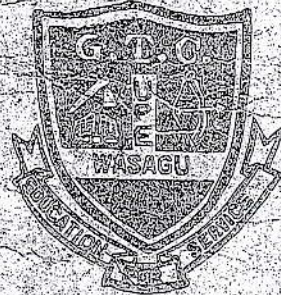
This Certificate is supplied only to schools approved by the Ministry of Education. It should be kept in a safe place for if lost or destroyed no copy will be issued.

SOSG 60/382/150 bks.



Government Teachers' College Wasagu

VIA ZURU, SOKOTO STATE, NIGERIA.



TESTIMONIAL NO. **0398**

This is to certify that:-

Shehu Magaji

Who was admitted into this College in 19 **78/79**

has completed the Teachers' Higher Elementary Course

(GRADE TWO)

at this approved Centre in the year 19 **83**

His Examination number was **023/0158**

He was (Office held)

and his

Conduct was **288**

DATE **4/8/83**



13 FEB 2021

Sign **AL**

STATUTORY DECLARATION OF AGE

GEN.93

1. UMMAYU MAGATI of ICERBE

do hereby make Oath and declare as follows:

1. That my age is 68 years
2. That I am the BROTHER of SHEHU MAGATI
(state relationship)
3. That to the best of my knowledge the said
..... was born at ICERBE
in ICERBE L.G.A of SOKOTO State
on the 1st Oct 1964 day of Oct 1964
4. That at the time his/her birth was not registered at.....
5. That I make this solemn declaration in good faith believing the contents to be truth by provision of the Oaths Act 1990 as amended.

Date: 1st MAY 2000

[Signature]
Sign. of Declarant

I certify that the above declaration have been read and interpreted to declarant and that he/she appears clearly to understand and affixed his/her mark to it in my presence.

Date: 1st MAY 2000

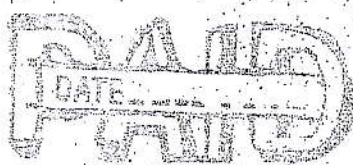
[Signature]
Sign. of Interpreter

SWORN IN AT HIGH COURT OF JUSTICE, SOKOTO

THIS DAY 1st

OF MAY

2000



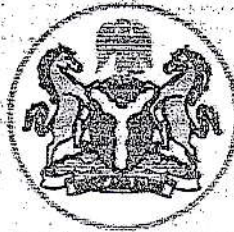
BEFORE ME

[Signature]
COMMISSIONER FOR OATHS

FEES PAID N2711K

REVENUE COLLECTOR'S RECEIPT NO: 1501/11/13795601





KEBBE LOCAL GOVERNMENT

Sokoto State of Nigeria

P.M.B.

Our Ref

Office of the Chairman
Kebbe Local Government
Sokoto State of Nigeria

Date: 14th AUGUST 2004
Reg. No: KBELG/ADM/



Certificate of Identification/Origin

This is to Certify That

The Beare.

SHEHU MAGAJI

is an Indigene /a resident of

KEBBE

Kebbe Local Government Area of Sokoto State of Nigeria. He / She was

born at

KEBBE

In

KEBBE

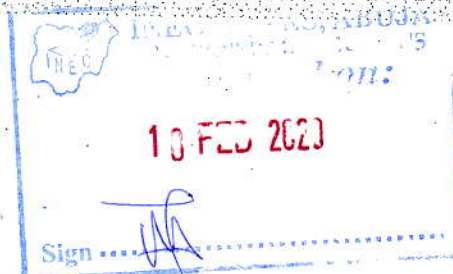
District

This Certificate covers his/her identification as an indigene of
Kebbe Local Government Sokoto State.

You are requested to give him/her every possible assistance please.

SECRETARY
Kebbe Local Government

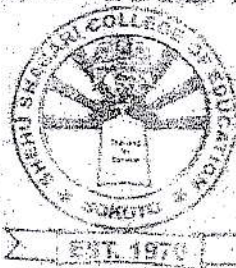
CHAIRMAN/DPM
Kebbe Local Government



SHEHU SHAGARI COLLEGE OF EDUCATION

P.M.B. 2129, SOKOTO

(OFFICE OF THE PROVOST)



Our Ref: ADM.NO. 6766/01/SO/KBE

Telegram SSCOED, Sokoto
Telephone: 060 - 232157

Your Ref: _____

Date: 18/4/2009

TO WHOM IT MAY CONCERN

SHEHU MAGAJI

We are pleased to inform you that you have fulfilled all the requirements for the graduation and the Academic Board of the College has, at its meeting

held on 29/7/2004 approved that you be awarded the
PASS

Nigeria Certificate in Education (N.C.E.) at
ENGLISH ISLAMIC STUDIES

Level in

Your name has been forwarded to National Commission for Colleges of Education (NCCE) for Certificate.

Accept our Congratulations.

PROVOST
SHEHU SHAGARI COLLEGE OF EDUCATION
P.M.B. 2129
SOKOTO

Prof. A.B. Yahya

Provost

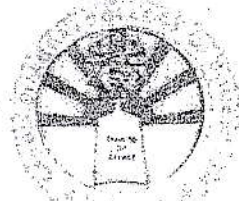


Motto: Training for Service

SHEHU SHAGARI COLLEGE OF EDUCATION

P.M.B. 2129, SOKOTO

(OFFICE OF THE PROVOST)



Telegram SSCOED, Sokoto
Telephone: 060 - 232157

ADM NO: 6766/01/SO/KBE

Your Ref: _____

Date: 18/4/2009

STATEMENT OF RESULT

SHEHU MAGAJI

This is to certify that the above named student has been awarded the Nigeria Certificate in Education (N.C.E) and obtained the following grades

TEACHING RPACTICE 3.00 - MERIT

2.21 - PASS

EDUCATION:

ENGLISH

2.12 PASS

ISLAMIC STUDIES

2.05 - PASS

GENERAL STUDIES:

2.10 PASS

OVERALL CGPA =

2.23 PASS

PROVOST
SHEHU SHAGARI COLLEGE OF E
P.M.B. 2129
SOKOTO

Prof. A. B. Yahya

Provost



NAME: SHEHU MAGAJI
 STATE: SO/KOTO
 LGA: ICEBERG
 WARD: KCBG & WEST



Party pledge: I pledge to abide by the constitution and manifesto of the party at all times. I will be a loyal, disciplined and active member of APGA. I will cooperate with officials of the party at all levels for the benefit of the party and country, Nigeria.

Member's Signature: _____

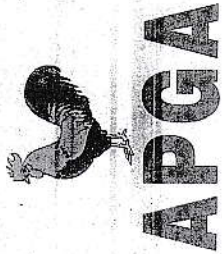
	JAN.	FEB.	MAR.	APR.	MAY	JUN.	JUL.	AUG.	SEP.	OCT.	NOV.	DEC.
2015												
2016												
2017												
2018												

Payment of monthly dues is mandatory for all categories of members and validity of such membership dependent on regularity of payment of the dues. Members may not be allowed to vote or participate in party functions, if payment is not up to date.

CHIEF (DR.) VICTOR IKE OYE
 National Chairman

LABARAN MAKU, CON
 National Secretary





APGA

ALL PROGRESSIVES GRAND ALLIANCE

Motto: Be your Brother and Sister's Keeper

This card is the property of
All Progressives Grand Alliance (APGA).
In case of loss, whoever finds it should
return it to the office below

MEMBERSHIP CARD

National Headquarters:
41B, Libreville Crescent,
after Mr. Biggs off Aminu Kano Crescent,
(Opp. Tulip Press), Wuse 2, Abuja.

Membership No 0005055