



**FORM: A**

**NOMINATION FORM (TO BE COMPLETED BY THE NOMINATOR)**

Title (tick relevant)	Mr	Mrs	Ms	Prof	Dr	Adv
Surname						
Name(s)						
Date of Birth						
Identity Number						
Gender						
Physical Address						
Mobile Number						
Occupation						
Name of Nominee						
Reasons for Nominating the person						

**Signature:** .....

**Date:**.....

**Witness Signature:** .....

**Date:** .....



**FORM: B**

**NOMINEE TEMPLATE FOR APPLICATION FOR COUNCIL MEMBERSHIP IN TERMS OF SECTION 12(b) OF THE CONTINUING EDUCATION AND TRAINING ACT AS AMENDED**

**SECTION: A**

Title (tick relevant)	Mr	Mrs	Ms	Prof	Dr	Adv
Surname						
Name(s)						
Date of Birth						
Identity Number						
Gender						
Physical Address						
Mobile Number						
Work Telephone						
Email Address						
Province						
Race						
Disability	Yes			No		
If yes, please indicate kind of disability						
Profession						
Membership of Organisations and Professional Bodies						
Highest Academic Qualification						
Are you a South African Citizen	Yes			No		
If not, please state citizenship						
Have you ever served as a council member in a college(s) council before?	Yes			No		
If yes, please state the name(s) of the colleges(s) and the period(s) of appointment.						



## SECTION B: COUNCIL MEMBERSHIP QUALIFICATIONS

The CET Act and college statutes contain grounds that disqualify persons from council membership. Please answer the following questions to determine whether you are eligible for appointment to a council of public.

<p>Have you been disqualified to act as a director in terms of the legislation regulating the governance of companies or removed from an office of trust by a court of law or similar tribunal or forum?</p> <p><b>Yes / No</b></p>
<p>Have you ever been convicted of an offence for which the sentence was imprisonment without the option of a fine?</p> <p><b>Yes / No</b></p>
<p>Have you ever been declared insolvent by a court of law?</p> <p><b>Yes / No</b></p>
<p>Have you ever been declared unfit to attend to personal affairs by a court of law?</p> <p><b>Yes / No</b></p>
<p>Have you in the past been involved in activities that could call into question your reputation?</p> <p><b>Yes / No</b></p>
<p>Are you a Member of Parliament or Legislature?</p> <p><b>Yes / No</b></p>
<p>Are there any real, perceived or potential conflicts of interest between your circumstances and any? matters relating to any public? If yes, please specify the institution</p> <p><b>Yes / No</b></p>
<p>Please also list any currently held board or council membership/directorship/trusteeship of any company, organization or trust. Include dates of commencement; if none held, please write, None.</p>
<p>Have you, in terms of your current work and/or other commitments, the capacity to diligently discharge your duties to council?</p>



## SECTION C: CONSENT AND DECLARATION

I (Please type your full name), hereby declare that:

- a) I disclosed all my interests in matters relating to the public.
- b) The information provided in this form is accurate.
- c) I acknowledge that the information provided on this form will be used by the College for the purpose of confirming my eligibility to serve as a college council sub-committee member.
- d) I acknowledge that the copies of the Identity Document, qualification, and training certificates are certified copies.
- e) I note that all information I provided will be held securely and kept confidential, except as may be required to be disclosed by law.

**Signature**.....

**Date**.....

### Disclaimers

- Acknowledgement of the nomination does not mean acceptance as a candidate or appointment.
- The Council reserves the right not to select any nominee as a candidate.
- Correspondence will be limited to shortlisted candidates only.