**NOMINATION OF CANDIDATE FOR APPOINTMENT AS A MEMBER OF CATHSSETA BOARD**

I\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

in my capacity as\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Nominate\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

to be appointed as a member to the CATHSSETA Board.

The candidate meet the selection criteria for members of the Accounting Authority as set out in the

CATHSSETA Constitution and has knowledge, skills and expertise in the following:- ***(please complete table below)***

|  |  |  |
| --- | --- | --- |
| **No** | **Areas of Expertise** | **No of Years**  **Experience** |
| 1 | Application of corporate governance and ethics |  |
| 2 | Financial management |  |
| 3 | Auditing |  |
| 4 | Legal |  |
| 5 | Human resource development, education, training and skills development |  |
| 6 | Quality assurance of learning provision |  |
| 7 | Skills development legislation and the National Skills Development  Plan (NSDP) |  |
| 8 | The Public Finance Management Act (PFMA) and Regulations |  |

The mandate of the CATHSSETA is to facilitate skills development in the following subsectors:

* Culture, Arts and Heritage;
* Tourism and Travel Services;
* Hospitality;

* Gaming and Lotteries;
* Conservation;
* Sport, Recreation and Fitness.

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **1.** | | **Nominating Organisation** | | |  | | | | |
| 1.1 | | Name of organisation | |  |  | | | | |
| 1.2 | | Sub-sectors |  | • | Culture, Arts and Heritage; | | |  | |
|  | |  |  | • | Tourism and Travel Services; | | |  | |
|  | |  |  | • | Hospitality; | | |  | |
|  | |  |  | • | Gaming and Lotteries; | | |  | |
|  | |  |  | • | Conservation; | | |  | |
|  | |  |  | • | Sport, Recreation and Fitness | | |  | |
| 1.3 | | Constituency |  | • | Organised Labour | | |  | |
|  | |  |  | • | Organised Employers | | |  | |
|  | |  |  | • | Recognised Professional Bodies | | |  | |
|  | |  |  | • | Civil Society | | |  | |
| 1.4 | | Organisation registration reference number | and/or |  |  | | | | |
| 1.5 | | VAT Number | |  |  | | | | |
| 1.6 | | Physical Address | |  |  | | | | |
| 1.7 | | Postal Address | |  |  | | | | |
| 1.8 | | Fax Number | |  |  | | | | |
| 1.9 | | Telephone Number | |  |  | | | | |
| 1.10 | | Email Address | |  |  | | | | |
| 1.11 | | Name of Mandated  Nominator | |  |  | | | | |
| 1.12 | | Position | |  |  | | | | |
| 1.13 | | Signature of  Mandated Nominator | |  |  | | | | |
| **2.** | **Nominee Details** | | | | | | | | |
| 2.1 | Name of individual | | | | |  | | | |
| 2.2 | Gender | | | | |  | | | |
| 2.3 | Identification number | | | | |  | | | |
| 2.4 | Name of Organisation | | | | |  | | | |
| 2.5 | Nominee Position | | | | |  | | | |
| 2.6 | Three Name of Contactable References (with telephone or mobile phone number) | | | | | 1.  2.  3. | | | |
| 2.7 | Do you have a qualification certificate from a foreign institutions | | | | | YES | NO | | |
| 2.8 | If yes to 2.7, please attach SAQA verification | | | | | YES | NO | | |
| 2.9 | Declaration if nominee is currently a Public Service Official (**please tick**  **Yes or No)** | | | | | YES | NO | | |
| 2.10 | If answered to Yes to the above question,2.9 **please tick** next to the statement to confirm and acknowledge that you have read and understood this notice | | | | | Kindly note that Employees of National Provincial and Local Government or Institutions, Agencies and Entities of Government serving on Commissions or Committees of Inquiry or Audit Committees are not entitled to additional remuneration. | | |  |
| 2.11 | The Minister will require prior to appointment the conducting of probity checks (criminal and civil records, reference checks, verification of experience and qualification and integrity test) on shortlisted candidates and the submission of this Nomination Form the candidate consents thereto. | | | | | YES | NO | | |

**Please Complete Document Checklist (check Yes or No)**

|  |  |  |  |
| --- | --- | --- | --- |
| No | Item | Yes | No |
| 1 | Copy of curriculum vitae attached |  |  |
| 2 | Certified copy of qualifications attached |  |  |
| 3 | Certified cop of Identity Document attached |  |  |
| 4 | Signed Acceptance of Nomination |  |  |
| 5 | Nomination Form fully completed |  |  |
| 6 | Declaration of Interest Form attached |  |  |
| 7 | MIE Consent Form completed |  |  |

Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_