

MICT SETA BOARD NOMINATION FORM

DETAILS OF NOMINATING ORGANISATION										
Organisation										
Contact Person										
Contact Details	Tel	Mobile	Email		Fax					
Business Address										
Postal address										
Constituency Representing										
Please tick the appropriate box	Organised Labo	Organised Employers	NGO/P Bodies	Professional	Government Departments					
I(Authorised representative)										
of					(Organisation)					
Hereby nominate (Mr/N	Sur	Surname: to								
represent the abovementioned organisation on the Board and acknowledge that our nominee, will										
represent and participate in the Board as per the Seta Constitution.										
Designation:										
Signature: (Principal/Ch	airperson)									
Date:										

	NO	MINEE DETA	AILS					
Surname (Mr/Ms/Mrs/Prof/Dr)								
Full Names								
	Please tick the appropriate box Male Fem							
Identity Number								
Address	Residential address:							
	Business address:							
	Postal address:							
Contact Details	Tel	Mobile	Email	Fax				
Employer			·					
Field of speciality and number of years in the field of speciality	Field		No. of years					
Membership of Professional Bodies								
Membership on other Boards	(if yes, please speci	ify)						
	ACCEPTA	NCE BY THE	NOMINEE					
I			(Nominee) hereby a	ccept the nomin	ation			
by				(Organis	sation)			
and make myself available to serve on the MICT SETA Board.								
Signed on this			day of		2021			
Signature (Nominee)								

Please send completed forms to: Board Secretary: Ayanda Maqele (Ms) Email: Ayanda.Manqele@mict.org.za Tel: (031) 307 7248