

**MICTSETA**Media, Information And
Communication Technologies
Sector Education And Training Authority

SHAPING SKILLS, PIONEERING INDUSTRIES, EMPOWERING FUTURES

MICT SETA BOARD NOMINATION FORM FOR THE TERM: 1 APRIL 2025 TO 31 MARCH 2030

| DETAILS OF NOMINATING ORGANISATION | | | |
|--|--|--|--|
| Organisation | | | |
| Contact Person | | | |
| Contact Details | Tel | Mobile | Email |
| Business Address | | | |
| Postal address | | | |
| Constituency Representing | | | |
| Please tick the appropriate box | Organised Labour <input type="checkbox"/> | Organised Employer <input type="checkbox"/> | Category of Role Players <input type="checkbox"/> |
| <p>I _____ (Authorised representative)</p> <p>of _____ (Organisation)</p> <p>Hereby nominate (Mr/Ms/Adv/Prof/Dr) Name: _____ Surname: _____</p> <p>to represent the abovementioned organisation on the Board of MICT SETA and acknowledge that our nominee, will represent and participate in the Board as per the SETA Constitution.</p> <p>Designation: _____</p> <p>Signature: (Principal/Chairperson) _____</p> <p>Date: _____</p> | | | |

| NOMINEE DETAILS | | | |
|---|--|--------------------------------------|--|
| Surname (Mr/Ms/Mrs/Adv/Prof/Dr) | | | |
| Full Names | | | |
| | Please tick the appropriate box | <input type="checkbox"/> Male | <input type="checkbox"/> Female |
| Identity Number | | | |
| Designated Group Please indicate with X where applicable | <input type="checkbox"/> People living with disabilities <input type="checkbox"/> Youth <input type="checkbox"/> Women | | |
| Address | Residential address: | | |
| | | | |
| | Business address: | | |
| | | | |
| | Postal address: | | |
| | | | |
| Contact Details | Tel | Mobile | Email |
| | | | |
| Employer | | | |
| Field (s) of speciality and number of years in the field of speciality | Field (s) | No. of years | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| Membership of Professional Bodies | | | |
| Membership on other Boards | (if yes, please specify) | | |
| | | | |
| | | | |



| | |
|---|-------------|
| | <hr/> <hr/> |
| ACCEPTANCE BY THE NOMINEE | |
| <p>I _____(Nominee) hereby accept the nomination by _____(Organisation) and make myself available to serve on the MICT SETA Board.</p> <p>Signed on this _____day of _____2024</p> <p>Signature (Nominee) _____</p> | |

The nomination form including supporting documents must be directed to:

The Board Secretary

Ms Nokwanda Qezu

MICT SETA

19 Richards Drive, Block 2, level 3 West, Gallagher Estate, Midrand, 1685

E-mail: 2025boardnominations@mict.org.za

The **deadline** for submission of all nominations is **on or before 29 November 2024**. The Nomination Forms and Declaration of Interest Forms are obtainable on MICT SETA website: <https://www.mict.org.za/>