



MQA NOMINATION AND ACCEPTANCE FORM

Constituency Represented:

(Please mark with an x in the appropriate box below)

Organised Employers	
Organised Labour	
Government	
Professional Bodies	
Sector-Specific Community Organisations	

Nominator:

Please note that the nomination form must be accompanied with a covering letter on an official letterhead from the nominator's organisation motivating the nomination.

I, _____

(write name in full)

employed by/serving on _____

(write name of organisation in full)

hereby nominate:

(write name in full)

employed by/serving on _____

(write name of organisation in full)

I _____ hereby accept the nomination for my name to be presented to the Minister of Higher Education and Training for consideration to be appointed to serve as a Member of MQA's Accounting Authority.

(Signature of Nominee)

(Date)

(Signature of Nominator)

(Date)

Please note that a current and abridged Curriculum Vitae of the nominee (no more than two A4 pages), certified copy of ID and certified copy of qualifications must be submitted together with the nomination form and declaration of interest form. All forms together with appropriate attachments must be submitted, under private and confidential cover to:

Dr Thabo Mashongoane

MQA Chief Executive Officer

Email: aanominations@mqa.org.za
