



KWAZULU-NATAL PROVINCE

ECONOMIC DEVELOPMENT, TOURISM
AND ENVIRONMENTAL AFFAIRS
REPUBLIC OF SOUTH AFRICA

DIRECTORATE:

Office of the HOD

Private Bag X454, PIETERMARITZBURG, 3200

270 Jabu Ndlovu Street, Pietermaritzburg, 3200

Tel: 033 264 2515 Fax: 033 341 2608

NOMINATION FORM FOR THE KWAZULU NATAL CONSUMER TRIBUNAL MEMBER POSITION

SECTION A

DETAILS OF NOMINATOR

Name and surname:

Designation:

Physical address:

.....

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Motivation of nomination (to be attached as annexure)

Date:

Contact details:

Signature of nominator:

SECTION B

DETAILS OF NOMINEE

Name :

Designation:

Contact details:

Current employment details:

.....

Relevant experience for the position being nominated to:.....

Qualifications (Attach CV) :.....

SECTION C

Please complete the following checklist to ensure that all the relevant documentation is submitted:

INFORMATION REQUIREMENTS	MARK (YES OR NO)
A completed nomination form	



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Motivation for the nomination which must include willing to travel or not (max 3 pages)	
A curriculum vitae of the nominee with certified copies of qualifications	
A certified copy of I.D	
Affidavit confirming that the nominee is not disqualified in terms of Section 12 of the KwaZulu Natal Consumer Protection Act 04 of 2013	

I, (Name of Nominee) _____ (please print),
agree to allow my name to stand for nomination for the position of Consumer Tribunal
Member to the KwaZulu Natal Consumer Tribunal.

Signed: _____