GAUTENG DEPARTMENT OF EDUCATION
GOVERNING BODY ELECTIONS
NOMINATION FORM

GAUTENG PROVINCE
EDUCATION
REPUBLIC OF SOUTH AFRICA

DEUGSAAM VIRTUOUS

NOMINATION OF PARENT MEMBER FOR THE SCHOOL GOVERNING BODY

SCHOOL: PRO PRACTICUM, P.O. BOX 5067, KRUGERSDORP WEST.

PERSON NOMINATED:
(Please print name) ……

NOMINATED AS A CANDIDATE FOR ELECTION AS A PARENT MEMBER OF THE SCHOOL GOVERNING BODY.

PROPOSER:

(Please print name)	ID/Passport Number	Signature
……	……	……

SECONDER:

(Please print name)	ID/Passport Number	Signature
……	……	……

CANDIDATE:

I, _____ (Full names), being a Parent/Guardian of a learner officially enrolled at the school, accept nomination as a candidate for election as a Parent Member of the Governing Body of the abovementioned school. I declare that I am not/have not:

(a) I am not mentally ill and have not been declared as such by a competent court.
(b) I am not an un-rehabilitated insolvent.
(c) Have not been convicted of an offence and sentenced to imprisonment in South Africa or a foreign country without the option of a fine for a period exceeding six months of failed to serve a full period of imprisonment.
(d) Have not been declared to be unsuitable to work with children as stipulated in terms of the Children's Act, 2005 (Act 38 of 2005) or registered on any offence register regarding child abuse.
(e) Had my membership terminated by the HOD in terms of SASA.

_____	_____	_____
Name	**ID/Passport Number**	**Signature**

……

FOR OFFICE USE ONLY: NOMINATION ACCEPTED BY ELECTORAL OFFICER

_____	_____	_____
Name	**ID/Passport Number**	**Signature**