

NOMINATION FORM

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| I nominate (print the full first names and surname of the candidate) | |
| as a candidate to be appointed by the Minister of Social Development as a board member of the National Development Agency | |
| Signature of person nominating | (Print full first names and surname) |

DECLARATION BY PERSON WHO SIGNS NOMINATION

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| I (print the full names and surname) | |
| declare that I am a South African citizen resident in the Republic at (state full residential address) and telephone:..... | |
| Signature of person nominating | |
| I certify that the deponent has acknowledged that he/she knows and understands the contents of this declaration. | |
| Sworn in/affirmed and signed before me at.....on..... Commissioner of Oaths. Office held..... Simultaneously with the lodging, each candidate shall lodge with the Minister:- a) A curriculum vitae; and b) A passport photograph on which the candidate's name is indicated on the back. | |

CONSENT TO NOMINATION

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| I (print full names, and surname)..... declare that:- | |
| a) I consent to nomination; | b) I am a South African citizen; |
| c) I am permanently resident in the Republic at (state full residential address) | |
| d) I agree to accept the nomination..... | |
| Signature of nominee..... | |
| Sworn in/affirmed and signed before me at.....on..... Commissioner of Oaths. Office held..... | |

Each nomination shall be lodged with the **Director-General of Social Development**, for the attention of **Mr. Siviwe Kakaza**, Private Bag x901, Pretoria 001 or hand delivered at HSRC Building, 134 Pretorius Street, Pretoria or **email: SiviweK@dsd.gov.za** by not later than **15 AUGUST 2025**.

