



SEKHUKHUNE TVET COLLEGE

CORPORATE OFFICE

REACHING GOALS TOGETHER

COLLEGE COUNCIL APPLICATION FORM

THE APPLICATION TO BE A COUNCIL MEMBER FOR TVET COLLEGE TO BE APPOINTED BY THE COLLEGE COUNCIL OF SEKHUKHUNE TVET COLLEGE

APPLICATION TO BE CONSIDERED AS A COUNCIL MEMBER FOR:

1. TVET College _____
2. Name of person _____
3. I.D. Number _____
4. Address _____

5. Tel No _____
6. Cell No _____
7. Date of Birth _____
8. Gender _____
9. Area of expertise (Legal, Finance, Audit, Human Resource, Planning and Infrastructure Development)

10. Formal work experience _____

11. Informal work experience _____

12. Educational Credits: 1) _____

2) _____

3) _____

13. Declaration

I declare that all information supplied is true; and that I am not prevented by any requirement in law to accept a nomination to the council.

Signature _____

Date _____

For enquiries, please contact Mr. Mpenyana AJ at 013 269 0278 /

email: mpenyanaa@sektvetcol.co.za