



SEKHUKHUNE
District Municipality

Private Bag X8611, Groblersdal
0470; 3 West Street, Groblersdal 0470
Tel: (013) 262 7300, Fax: (013) 262 3688
E-Mail: sekinfo@sekhukhune.co.za

Nomination of Person to be appointed as a member to the Sekhukhune District Municipality Municipal Planning Tribunal in terms of Section 36(1)(b) of Spatial Planning and Land Use Management Act, 2013 (Act No. 16 of 2013) read together with the regulation (3)(2)(a) of the Spatial Planning and Land Use Management Regulations: Land Use Management and General Matters, 2015

A. Personal Details

Surname				
First Name				
ID or Passport Number				
✓ Race (please tick)	African	Coloured	Indian	White
Gender	Female		Male	
Do you have a disability	Yes		No	
If yes, Elaborate				
Are you a South African Citizen? (please tick)	Yes		No	
If no, what is your Nationality				
Work permit Number(if any)				
Do you hold a professional membership with any professional body, If yes provide information below (please tick)	Yes		No	
Professional body:(tick) attach copy of membership)	Membership number	Expiry date		

B. Contact Details

Preferred language for correspondence	
Telephone number during office hours	

The purpose of this form is to assist the municipality in selecting candidates to serve in the Sekhukhune District Municipal Planning Tribunal. This form must be completed in full, accurately and legibly. All substantial information relevant to a candidate must be provided in this form. Any additional information may be provided on the CV, Candidates shortlisted may be requested to furnish additional information that will assist municipalities to expedite recruitment and selection processes, All information received will be treated with strictly confidentiality and will not be used for any other purpose than to assess the suitability of the applicant.

Preferred method for correspondence		Post		Email			
Correspondence contact details (in terms of the above)							
C. Qualification (Additional Information may be provided on your CV and please cross X if the information is already on your cv)							
Name of School		Highest Qualification obtained		Year obtained			
Name of institution			Name of Qualification				
D. Work Experience (Additional Information may be provided on your CV)							
Employer		Position		From		To	
				Month	Year	Month	Year
If you were previously employed in local government, indicate whether any conditions exists that prevents your re-employment						Yes	No
If yes, provide the name of the previous municipality							
E. Disciplinary record							
Have you been dismissed for misconduct?		Yes			No		
If yes, Name of municipality/institution							
Type of misconduct/transgression							
Date of resignation/disciplinary use finalized							
Award/Sanction							
Did you resign from your job on or after pending finalization of the disciplinary proceedings? If yes, provide details on separate sheet		Yes			No		
F. Criminal Record							
				Yes		No	

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If yes, state type of criminal act		
Date Criminal case finalised		
Outcome/Judgement		
G. Reference (please cross X if information is on your cv)		
Name of referee	Relationship	Tel (Office Hours)

DECLARATION

I hereby declare that all the information provided in this application and any attachments in support thereof is to the best of my knowledge true and correct. I understand that any misrepresentation or failure to disclose any information may lead to my disqualification or termination of my appointment in the tribunal

Signature :

Date :

Check List	
Copies of academic qualifications attached	
Are you registered with the Professional body (State Name and Membership Number)?	
Do you have Leadership Qualities?	
Do you have experience of Spatial planning, Land Use management and Land Development or the law related thereto?	
Have you attached your comprehensive CV? (not more than 5 pages)	
Have you attached qualifications and registration certificates indicating registration with the relevant professional body or Voluntary association	
Motivation by the nominator or self-nominator for the appointment of the nominee (not more than 2 pages)	

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I _____ (full names of nominee), ID No (of nominee) _____
_____ hereby declare that –

1. I am available to serve on Sekhukhune District Municipality Joint Municipal Planning Tribunal and I am willing to serve as chairperson or deputy chairperson should the Council designate me / I am not willing to serve a chairperson or deputy chairperson (delete the option not applicable);
2. there is no conflict of interest OR I have the following interests which may conflict with the Sekhukhune District Municipality Joint Municipal Planning Tribunal and which I have completed on the declaration of interest form (declaration of interest form to be completed only after formally appointed)
3. I am not disqualified in terms of section 38 of the Spatial Planning and Land Use Management Act, 16 of 2013 to serve on the Sekhukhune District Municipality Joint Municipal Planning Tribunal and I authorize the Sekhukhune District Municipality to verify any record in relation to such disqualification or requirement.
4. I undertake to sign, commit to and uphold the Code of Conduct applicable to members of the Sekhukhune District Municipality Joint Municipal Planning Tribunal.

Signature of Nominee _____

Full Names of Nominee _____

Date:

Place: -----

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