

NOMINATION FORM

INSTRUCTIONS

The following are instructions for the completion of this nomination form:

In this nomination form the term "Company or Organisation" is used to refer to Designated Employers, including those that voluntary comply with the Act; in particular Chapter 3 of the Act.

- 1. Participants must complete all sections of the nomination form
- 2. Participants must complete the nomination form (fully and accurate) and where "YES" is indicated, provide supporting information or evidence as a schedule or annexure with the relevant heading
- 3. Any annexure, supporting information and evidence must be numbered as per each section of the nomination form
- 4. All supporting documents must be submitted in hard copies
- 5. The completed nomination form must be signed by the Chief Executive Officer/ Accounting Officer
- 6. Should the employer have an enquiry regarding the completion of the nomination form, please contact:

THE DEPARTMENT OF LABOUR

Address: Room 105, Laboria House, 215 Francis Baard Street, Pretoria, 0001 Contact Person: Themba Nkosi

Contact Person: Themba Nkosi Tel.: 012 309 4721/4034/4331

Fax: 086 276 9330

E-mail: genius.nkosi@labour.gov.za

niresh.singh@labour.gov.za

NB. The nomination form must be delivered to the above address





SECTION A: EMPLOYER DETAILS

Trade name:
DTI registration name:
DTI registration number:
PAYE/SARS number:
UIF reference number:
EE reference number:
Seta classification:
Industry/Sector:
Postal address:
Postal code:
City/Town:
Province:
Physical address:
Postal code:
City/Town:
Province:
DETAIL C OF OFO /A COCUMITING OFFICED
DETAILS OF CEO/ACCOUNTING OFFICER
Name and surname:
: Telephone number:
Fax number:
Email address:



NOMINATION FORM

DE	TAILS OF EMPLOYMENT EQU	ITY S	SENIOR MANAGER
Na	me and Surname:		
Tel	ephone number:		
Fax	x number:		
Em	nail address:		
BU	SINESS TYPE (please tick x)		
	Private Sector National Government Local Government Non-profit Organisation		State Owned Enterprise Provincial Government Educational Institution
INI	FORMATION ABOUT THE ORG	ANIS	SATION
	mber of employees in the ganisation		0 to 49 50 to 149 150 or more
	vour organisation an organ State?		Yes No
	your organisation part of a oup / holding company?		Yes No
	es, please provide the		



SECTION B: ASSIGNMENT OF SENIOR EE MANAGER (S)

6

Did your organisation publish a summary of a report required by Section 22 in your annual

SECTION G: PUBLICATION OF REPORT

☐ Yes

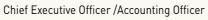
financial report/annual report tabled in Parliament?

. □ No

If yes, please submit a copy of the Annual Financial Report/Annual Report tabled in Parliament.
SECTION H: DUTY TO INFORM
Did your organisation display any notice informing employees about the provisions of the Employment Equity Act or the most recent report submitted in terms of Section 25? □ Yes □ No
SECTION I: DUTY TO KEEP RECORDS
Did your organisation establish and, for the prescribed period, maintain records in respect of ts workforce, its employment equity plan and any other records relevant to its compliance with Section 26 of the Employment Equity Act? □ Yes □ No
SECTION J: ENFORCEMENT AND DISCRIMINATION CASES
Did a labour inspector secure a written undertaking to your organisation in terms of section 36 of the Employment Equity Act? ☐ Yes ☐ No
Did a labour inspector secure a compliance order to your organisation in terms of Section 37 of the Employment Equity Act? ☐ Yes ☐ No
Was your organisation referred to the CCMA in relation to unfair discrimination dispute in terms of Employment Equity Act? Pes No If yes, please provide the brief details of the unfair discrimination dispute?
Was your organisation referred to the Labour Court in relation to unfair discrimination in terms of the Employment Equity Act? ———————————————————————————————————
s there any unfair discrimination case(s) pending against your organisation at the CCMA or the Labour Court? See No If yes, please provide a summary report of the case.

SECTION K: SIGNATURE OF CHIEF EXECUTIVE OFFICER/ACCOUNTING OFFICER

	name of company/organisation)				
hereby declare that I have read,	approved and authorised this inforr	nation.			
Signed on thisday of	(month) ye	ar			
At (place):					
	Signature				







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