

# THEBEMED 2023 BOARD OF TRUSTEES ELECTIONS



## NOMINATION FORM

### Section 1: Particulars of the Proposer

I, \_\_\_\_\_

Membership Number:

ID No.:

Hereby nominate \_\_\_\_\_ to stand as a Candidate in the THEBEMED 2023 Board of Trustee election conducted in terms of Rule 18.2 of the THEBEMED registered Rules.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Contact Number: \_\_\_\_\_ Email: \_\_\_\_\_

### Section 2: Particulars of the Nominee & Nomination Acceptance

I, \_\_\_\_\_

Membership Number:

ID No.:

Hereby give notice that I accept my nomination to stand for election as a Candidate to fill the position of the Trustee on the THEBEMED Board of Trustees. I declare that I am not disqualified to be a candidate in terms of Rule 18.1.2 and criteria as contained in the Election Notice. I further confirm that my duly completed CV Form, and ID size photograph (electronic preferably) **WILL** accompany this Nomination Form.

### Section 3: Particulars of the Seconder

I, \_\_\_\_\_

hereby declare my support for this nomination and confirm that my membership details are:

Membership Number:

ID No.:

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Contact Number: \_\_\_\_\_ Email: \_\_\_\_\_

## Section 4: Disclosures

1. Have you ever suffered from a mental illness which has rendered you incapable of managing your affairs, institutionalised or otherwise have been or are incapable of managing your affairs due to mental illness? If yes, please provide details of this.  
\_\_\_\_\_  
Y | N
2. Have you ever been declared insolvent or have you surrendered your estate for the benefit of creditors? If yes, please provide details of this.  
\_\_\_\_\_  
Y | N
3. Are you currently under debt review or counselling? If yes, please provide details of this.  
\_\_\_\_\_  
Y | N
4. Have you ever been convicted of any criminal offence in the Republic of South Africa or elsewhere? If yes, please provide details on the nature of the offence and the date of the conviction.  
\_\_\_\_\_  
Y | N
5. Are you currently being prosecuted for any criminal offence in the Republic of South Africa or elsewhere? If yes, please provide details on the nature of the offence.  
\_\_\_\_\_  
Y | N
6. Are you currently being investigated for any criminal offence in the Republic of South Africa or elsewhere? If yes, please provide details on the nature of the offence.  
\_\_\_\_\_  
Y | N
7. Have you ever been removed by any Court of Law or other Tribunal from any office of trust on account of misconduct? If yes, please provide details of this.  
\_\_\_\_\_  
Y | N
8. Are you currently being prosecuted by any Court of Law or other Tribunal for acts of misconduct? If yes, please provide details of this.  
\_\_\_\_\_  
Y | N
9. Have you ever been disqualified under any law from practicing your profession? If yes, please provide details on the nature and date of the disqualification.  
\_\_\_\_\_  
Y | N
10. Have you ever been dismissed from your place of employment? If yes, please include relevant dates, name(s) of organisations and contact persons.  
\_\_\_\_\_  
Y | N
11. Are you currently being disciplined at your place of employment for having committed any act of misconduct? If yes, please provide details.  
\_\_\_\_\_  
Y | N
12. Are you currently being investigated at your place of employment for having committed any act of misconduct? If yes, please provide details.  
\_\_\_\_\_  
Y | N
13. Have you ever been disqualified under any law or rules of the Scheme to hold the office of Trustee? If yes, please provide details on the nature and date of the disqualification.  
\_\_\_\_\_  
Y | N
14. Are you aware of any investigations or proceedings against you by the Registrar of Medical Schemes or the Council for Medical Scheme in terms of Section 46 of the Medical Schemes Act or otherwise? If yes, please provide the details.  
\_\_\_\_\_  
Y | N

15. Have you ever been removed or resigned from any office, position of trust or any position of authority under any law, policy or internal process? If yes, please provide details.

Y | N

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16. Are you aware of any factor that could impact on your fitness and propriety to hold the office of a Trustee? If yes, please provide details.

Y | N

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**PLEASE NOTE:** For a nomination to be valid, the Proposer, Nominee and Secunder must complete their sections in **FULL** and **MUST BE PRINCIPAL MEMBERS IN GOOD STANDING**. The completed Nomination Form and CV Form must reach the Returning Officer on or before 12:00 noon, 5 May 2023 as follows:

a) Fax to:

The Returning Officer  
Thebemed 2023 Board of Trustees  
Election  
086 678 4123

b) Scan to Email to:

[thebemed2023@electionsagency.co.za](mailto:thebemed2023@electionsagency.co.za)

c) Deposit into a Nominations Box placed at any of the listed workplaces in the Election Notice.