

**NOMINATION FORM: NATIONAL HEALTH RESEARCH ETHICS COUNCIL**

This nomination form should be used for the nomination of persons.

We, the undersigned,

1. ....  
.....  
.....  
.....  
(Full names and address)

2. ....  
.....  
.....  
.....  
(Full names and address)

declare that we represent / are members of:

.....  
.....

and hereby nominate, as a candidate for nomination as a member of the National Health Research Ethics Council,

.....  
.....who holds the title of  
..... and is employed as a  
.....and is a South African citizen/is not a South Africa citizen but is a permanent resident of South Africa\*.

Signed at ..... on.....  
20.....

1. ....  
..... (Signature)

2. ....  
..... (Signature)

Signed in the presence of the following witnesses:

Signature:.....

Full Names:.....

Signature:.....

Full Names:.....

I, undersigned ... (Full names), hereby consent to my nomination as a candidate for nomination as a member of the National Health Research Ethics Council.

Signature \_\_\_\_\_

Signed at ..... on.....  
20.....

.....

(Signature)

.....  
.....  
.....  
.....

(Registered address and contact details)

Signed in the presence of the following witnesses:

Signature:.....

Name:.....

Signature:.....

Name:.....

\* Delete whichever is not applicable