

THE SOUTH AFRICAN CHEFS ASSOCIATION

ELECTION OF DIRECTORS 2019/20

Your Full Name:

Your Membership Number:

I nominate (Full Name)

For Director for the South African Chefs Association 2019/20

My Nominee meets the following criteria as per Rule 2.3.2

- (a) Held Professional member privileges for at least five consecutive years and must maintain a Professional member status while holding office;
- (b) Have served for at least two years as:
 - (i) An elected Regional Officer or
 - (ii) A Special Elected Committee Chair;
 - (iii) Have attended two Annual General Meetings prior to his/her election;
 - (iv) Be a member in good standing
 - (v) Be an active member in good standing within the hospitality Industry
 - (vi) Must reside and work within the Republic of South Africa

Acceptance of nomination:

Nominee Full Name:

ID Number:

Membership No:

I confirm my acceptance of the nomination and understanding of the commitment to the responsibility and duties that I will have to perform/fulfil.

Signature Nominee:

Date:

Please return to <u>daniella@sachefs.co.za</u> no later than the **16 April 2019**