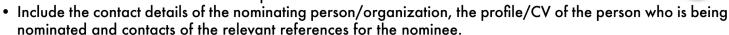
CALL FOR NOMINATION FOR GAUTENG DEPARTMENT OF HEALTH CLINIC COMMITTEES 2024-2027

The Gauteng Member of the Executive Council (MEC) for Health and Wellness, Ms. Nomantu Nkomo-Ralehoko calls for the Gauteng community to nominate individuals to serve as Clinic Committee members in public clinics across the province.

Clinic Committees are statutory bodies appointed by the MEC for the Health and Wellness according to Section 42 of the National Health Act, No.61 of 2003. Their main objectives include promoting effective and efficient governance through public participation, assisting the clinics in addressing the health needs of the communities they serve, ensuring accountability and effective management of the facilities.

NOMINATIONS

- Nomination forms are obtainable at the Clinics and on the Gauteng Health website:
- Submissions must be made to the respective local clinic.





- A Person older than 18 years of age who is a South African citizen.
- A Person with at least a Matric qualification.
- A Person who has not been certified by a court of Law as being of unsound mind.
- A Person who has not been convicted of a crime without an option of a fine, unless:
 - 1. They have received a free pardon,
 - 2. A period of ten (10) years has lapsed since release from prison and they are certified as fully rehabilitated by the Department of Correctional Services.
- The Person must reside in the community serviced by the clinic.
- They must have sound knowledge, understanding and involvement in community work.
- They must at least have sound knowledge of the health sector.
- They must have skills and/or experience in community development and leadership.

APPOINTMENT PERIOD

- 3-year term.
- A member may serve for three (3) consecutive terms.

NB: CLINIC COMMITTEES ARE AN OPPORTUNITY FOR THE PUBLIC TO VOLUNTEER THEIR TIME TO SERVE THEIR LOCAL COMMUNITY, THUS THERE IS NO STIPEND.

Nominations open on the 14th January 2024 and close by 16h30 on the 31st January 2024.

For further enquiries please contact:

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Ms. Mpuleng Kgotleng@ 079 526 3576 | Email: Mpuleng.Kgotleng@gauteng.gov.za

Mr. Sizwe Zwane@ 060 722 3667 | Email: Sizwe.Zwane@gauteng .gov.za



SCAN QR CODE TO ACCESS THE NOMINATION FORM & CV TEMPLATE







NOMINATION FORM FOR CANDIDATES TO SERVE AS GAUTENG DEPARTMENT OF HEALTH CLINIC COMMITTEE MEMBERS FOR A THREE-YEAR PERIOD: 2024 - 2027

Name of Clinic for the nomination:							
Name of the person nominated:							
Contact details of nominated person:							
Cell:							
Email:							
Name of the person nominating:							
Contact details of the nominating person: Tel:							
Cell:							
Email:							
Motivation for nomination:							
Signature of the nominator:							
Date: DD/MM/YYYY							
Signature of the nominated:							
Date: DD / MM / YYYY							

CURRICULUM VITAE

PERSONAL INFORMATION								
Surname								
First Names								
Date of Birth								
ID number								
Race								
Gender								
Do you have a disability?								
Are you a South African Citizen?								
Telephone Number								
Adress								
QUALIFICATIONS								
							tained	
Name of School/ Technical College		Highest qualification obtained				real Obtained		
Tertiary Education								
Name of Institution	Name of Qualification Year Obtained							
Traine of histitution		Name of Qualification				Tear Obtained		
Current study:								
Can che stady.								
WORK EXPERIENCE (please i	gnore if you	ı have attache	ed a CV	with th	iese de	tails)		
Employers (including urrent	Post hel	Post held			То		Reason for Leaving	
employer)								
			MM	YY	MM	YY		
REFERENCES								
Name	Position			Conta				
Name	on Cont				itact			
Signaturo:								
Signature:								