



International Management Development Programme (IMDP) 2024 – 2025
Advanced Diploma in General Management (NQF Level 7)

International Executive Development Programme (IEDP) 2024 – 2025
Post Graduate Diploma in Business Administration (NQF Level 8)

Nomination Form

All five (5) sections to be completed
Please tick with x where applicable.

SECTION 1: NOMINATION TYPE

Self-Nomination	<input type="checkbox"/>
Organisation Nomination	<input type="checkbox"/>

SECTION 2: COMPANY DETAILS

Organisation Name	
FoodBev SETA Levy Number	
Chamber	Baking <input type="checkbox"/> Food Preparation <input type="checkbox"/> Beverages <input type="checkbox"/> Processed Food <input type="checkbox"/> Dairy <input type="checkbox"/>
Organisation's Address	
Name of Company Representative	

IMPORTANT TO NOTE: Applicants must be employees of organisations registered with the FoodBev SETA and in compliance with WSP/ATR submission requirements. Companies will need to supply the levy numbers of their FoodBev SETA registration.

SECTION 3: NOMINEE DETAILS:

IMPORTANT TO NOTE: All nominated applicants are required to submit the following with the nomination form:

1. Signed and completed application form
2. Certified copy of identity document / passport
3. Certified copy of highest secondary qualification
4. Certified copy of highest tertiary qualification
5. Curriculum vitae / Detailed biography
6. A short-written motivation "**What are some of the burning challenges within your organisation & how will you solve them with this programme**" (250 words)
7. Any other information requested per application requirements for a specific program

Kindly list each applicant per line.

Name & Surname		Contact Number		
Designation		Email Address		
Highest Qualification		Disability	YES	NO
Gender		Province / City		
Race		Line Manager Nomination		
ID Number		Signature		

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Highest Qualification		Disability	YES	NO
Gender		Province / City		
Race		Line Manager Nomination		



ID Number		Signature	
Name & Surname		Contact Number	
Designation		Email Address	
Highest Qualification		Disability	YES <input type="checkbox"/> NO <input type="checkbox"/>
Gender		Province / City	
Race		Line Manager Nomination	
ID Number		Signature	

SECTION 4: COMPANY HR OR L&D REPRESENTATIVE

Name & Surname	
Designation	
Email Address	
Contact Number	

SECTION 5: DECLARATION PER APPLICANT

I, (full name) _____ declare that the information supplied in this application is accurate and true to the best of my knowledge and belief.

In so doing, I hereby make a commitment to my success herein by:

1. I commit to attend all modules for this programme, both/either face-to-face and/or virtual including international immersions.
2. I am aware of the completion requirements of the programme and that all modules for this programme, face-to-face/virtual, are compulsory as per the assessment weightings provided in the information session/s.
3. If I am not able to attend a scheduled module, I commit to notify my direct line manager and GIBS Programme Manager/s in a timeous manner, as far as possible.
4. I commit to prepare for modules by reading and completing all pre-work provided and to show up to participate in each module in a face-to-face/virtual setting.
5. I commit to actively participate in modules as this is important to my learning experience and to be respectful toward my fellow learning colleagues.
6. I commit to complete all post-module evaluation surveys.

Consent to Process Personal Information in terms of the Protection of Personal Information Act, 4 OF 2013 (POPIA)

7. I hereby give my consent to GIBS and FoodBev SETA to collect, process, store and distribute my personal information where it is procedurally and legally required to do so.
8. I understand my right to privacy and the right to have my personal information processed in accordance with the conditions for the lawful processing of personal information.
9. I acknowledge that I understand the purposes for which my personal information is required and for which it will be used within the context of student journey.
10. I hereby consent to GIBS and FoodBev SETA sharing my personal information with third parties strictly for reporting purposes to the relevant Educational Quality Council.
11. I understand that all my personal information provided to GIBS and FoodBev SETA will be held and stored securely for the purposes for which it was collected.

12. I declare that all my personal information supplied to GIBS is true, accurate, up to date, not misleading or erroneous, and complete in all respects.
13. I undertake to immediately advise GIBS of any changes to my personal information should any of these details change

Signature _____ Date _____

