

## DEPARTMENT OF SPORT, ARTS & CULTURE HEAD OFFICE

**NOMINATION FORM: APPLICATIONS TO SERVE IN LACC** 

A.TO BE COMPLETED BY NOMINATOR:	
SURNAME:	
FIRST NAMES:	_
ID NO:	
DESIGNATION:	_
DISTRICT	_
SIGNATURE OF NOMINATOR:	
DATE:	<u> </u>
B. ACCEPTANCE BY NOMINEE	
SURNAME:	<u> </u>
FIRST NAMES:	_
ID NO:	_
DESIGNATION:	_
DISTRICT	_
SIGNATURE OF NOMINEE:	
DATE:	<u></u>
Ι	_ACCEPT TO BE NOMINATED TO
SERVE IN THE MRM COMMITTEE	

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