

**NOMINATION FOR STATUTORY COMMITTEES**

**CANDIDATE INFORMATION**

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| **NOMINATION FOR THE COMMITTEE FOR AUDITING STANDARDS (CFAS)** |
| **Position for which the nomination is being submitted, per Section 22(1) of the Auditing Profession Act, as amended** |  |
| **CANDIDATE DETAILS** |
| **Full names** |  |
| **Gender**[[1]](#footnote-1) |  |
| **Race**[[2]](#footnote-2) |  |
| **Address 1** |  |
| **Address 2** |  |
| **Telephone number** |  |
| **Email address** |  |
| **Nationality** |  |
| **Language** |  |
| **Country of residence** |  |
| **Professional designation** |  |
| **Professional affiliation(s)** |  |
| **Prior IRBA involvement:*** **Committee(s)**
* **Term(s) served**
 |  |
| **Present occupation** |  |
| **Educational background** |  |
| **Professional experience** |  |
| **Appointments/activities/experience in auditing standards and auditing standard setting, as well as in related technical aspects**  |  |
| **Why do you wish to be appointed to this position?** |  |
| **What would be your objectives as a member of this committee?** |  |
| **Explain how your skills, knowledge and experience are relevant to this position** |  |
| **Has there been any disciplinary action against you by accounting or other professional bodies, regulators or others? If yes, please provide the details.** |  |
| **Will you be able to meet the time commitments indicated for members on this committee?** |  |
| **Nominating organisation (if applicable)** |  |
| **Contact person at the nominating organisation** |  |
| **Contact details of the abovementioned person:*** **Telephone number**
* **Cellphone number**
* **Email address**
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**Please submit your completed Nomination Form to** **ivanker@irba.co.za** **or** **sadam@irba.co.za** **by no later than 8 January 2025.**

***Thank you for your submission.***

1. Information required to ensure a balance in gender representation on the CFAS. [↑](#footnote-ref-1)
2. Information needed to ensure a balance in demographic representation on the committee. [↑](#footnote-ref-2)