

APPLICATION AND/OR NOMINATION FORM DISCIPLINARY COMMITTEE (DISCOM)

NOMINATION POSITION	Discom member
Candidate information	
Full names	
Surname	
Gender*	
Race*	
Address 1	
Address 2	
Town / City	
Telephone Mobile number	
Telephone Landline (or alternate number)	
E-mail	
Alternate E-Mail	
Nationality	
Language	
Country of residence	
Professional designation/s	

Prior or current PAAB/IRBA involvement	
Committees/Other appointments	
Terms served	
(The PAAB is the IRBA's predecessor body)	
Prior or current involvement with SAICA and/or ACCA (to assess experience and conflicts of interest)	
Present occupation and employer	
Educational background	
(Kindly also indicate highest qualification and submit the certificate with the application)	
Professional experience and competencies	
(Refer to call for nominations)	
Professional accreditation/s	
Explain why you wish to be a member of the IRBA DISCOM	
Explain how your skills, knowledge and experience are relevant to this position.	
Has there been, or are there any disciplinary actions (or ongoing investigations) against you by accounting or other professional	

bodies, regulators, employers or others? If yes, please describe.	
Will you be able to meet the time commitments for the IRBA DISCOM?	
(minimum of 4 meetings per annum and sitting on disciplinary hearing)	

^{*} This information is required to ensure gender and demographic representivity on the IRBA.

Please submit your completed Nomination Form, your CV, certificate of highest qualification and motivation to: mkirwin@irba.co.za

By no later than the date noted on the advert.

THANK YOU FOR YOUR SUBMISSION