Annexure A
Western Cape Education Department
Directorate: Assessment Management
WCED.Irregularities@westerncape.gov.za

NOMINATIONS FOR APPOINTMENT AS MEMBERS OF THE DISTRICT ASSESSMENT IRREGULARITIES COMMITTEE

Education district: _____

The following are nominated:

	Title	Surname	Full name(s)	Designation
1.				
2.				
3.				
4.				
5.				
6.				
7.				
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11.				
12.				
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16.				
17.				
18.				
19.				
20.				

_____ _____

District Director signature **Date**