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Reg No: MOHSS 003

2024 Trustee nomination form

1. NHP Board of Trustees are elected and serve on the Board for a 3 year cycle. The nominations will be conducted via election by electronic vote before the Annual General Meeting to be held on Friday, 28 June 2024.
2. The Board of Trustees currently has two vacancies which **require the expertise of a principal member qualified in Human Resource Management, Investments and Legal**. When making a nomination it is imperative that you consider these areas of expertise. Only nominations that fit these roles shall be considered.
3. Potential nominees must preferably have relevant professional experience, senior leadership experience and applicable board/and or trustee experience. A Bachelors Degree (minimum NQA7) in any of the above disciplines and relevant professional experience is required. Integrity, strategic thinking skills and excellent interpersonal skills are further requirements.
4. This form can either be delivered to any of our NHP branches or scanned and emailed to nhpagm@nhp.na. **The deadline for submission of this form is 12:00 pm on Wednesday, 3 April 2024.**

Prerequisites for completion and processing

Please note In order for the Fund to deliver an efficient service to you, it is important that you provide and complete the information as required. Late entries will not be considered.

1. Print clearly using capital letters. All sections must be completed. We cannot accept this form if it is incomplete or incorrect.
2. Your full personal details, including a comprehensive CV are essential for our records, thus please provide in full.
3. Please provide a recent colour passport photograph of yourself.
4. Please provide your active NHP membership number.
5. Only active NHP Principal members will be eligible for nominations and secondants.
6. Submission of this nomination form and any further requested documents does not guarantee approval.

Particulars of nominee

NHP membership number (11 digits)	<input type="text"/>									
Title	<input type="text"/>	Initials	<input type="text"/>	First name(s)	<input type="text"/>					
Surname	<input type="text"/>									
Email address	<input type="text"/>									

Short resumé of nominee

Employed at	<input type="text"/>
Current position held	<input type="text"/>
Highest qualification(s)	<input type="text"/>
	<input type="text"/>
Workplace experience	<input type="text"/>
	<input type="text"/>
Trustee experience	<input type="text"/>
	<input type="text"/>

Nominee acknowledgment and declaration

Please note To be able to fulfil his/her duties as Trustee of the NHP Medical Aid Fund, the following corporate governance guidelines should be adhered to and confirmed underneath by signature.

1. I am not a person under the age of 21 years.
2. I am a Principal member of the Fund.
3. I am not a director, member, employee or any other official of any organisation serving as the administrator of the Fund.
4. I am not a director, member, employee or any other official of any organisation rendering services to the administrator in connection with the business of the Fund.
5. I have not been declared insolvent.
6. I have no criminal record.
7. I have no direct conflict of interest with the business of the Fund due to business ties or other relationships whatsoever.
8. I understand that management of the Fund implies the fulfilment of my fiduciary duties as a Trustee of NHP.
9. I give consent to undergo a background check (ITC) to ensure that I am fit and proper to serve as a Trustee.

Signature of nominee

D D M M 2 0 Y Y

Date

Particulars of secondant: Supporting Principal member as a Trustee nominee

Please note The secondant must be a Principal member and not fall under the nominees membership with NHP.

NHP membership number (11 digits)

Title Initials First name(s)

Surname

Namibian ID number

D D M M 2 0 Y Y

Date

