

The International Federation of Social Workers (IFSW) Africa Region C/O Social Workers' Association of Zambia

C/O Social Workers' Association of Zambia Plot No. 6814 Kabile Road, Olympia Extension Lusaka, P.O. Box KL77 Lusaka | Telephone: +260 965844875, Email:joachim.mumba@ifsw.org

IFSW AFRICA REGION - COMMISSIONS NOMINATION FORM

1. PERSONAL DATA			
Name of Candidate:			_
Name of Member organization:			_
Country:	/ Email:		
Telephone:			_
2. COMMISSIONS			
I confirm my interest to state as appropriate):	and for selection	n to the following Commission (please	e indicate,
Commission	Indigenous Commission (Candidate for the Indigenous commission ust be an indigenous social worker or professionals that feel he/she dentifies with indigenous social work knowledge and values)		
☐ Human Rights Commission	☐ Education Interim Commission		
ļ	☐ United Natio	ons Commission	
WORKERS My candidacy is support standing of the Internationa	ed by the N [(Your As l Federation of	BER NATIONAL ASSOCIATION OF Social Works a sociation ought to be a member Social Workers (IFSW). Please attach by our member Association supporting	rkers - in good copy of
Designation:		Date:	
Name of Authorized Repr	esentative:	Signature:	

4. MOTIVATIONAL STATEMENT

My anticipated contribution to commission once selected (please enter up to 200 words - if you would like to provide more, please attach a separate document):
g gen are an experience and experien
5. DECLARATION OF COMMITMENT
I confirm my availability and commitment to advance the objectives of the commission.
I would also like to confirm my commitment to participate in all meetings related to
this commission, should I be selected.
Signed:
Date:

Please return completed form as scanned copy or PDF version attachment to <u>joachim.mumba@ifsw.org</u> copying <u>nmuridzo@gmail.com</u>. The deadline for the submission of nomination forms is 23:59 CAT on Friday 21 December 2018. All forms received thereafter will be treated as invalid.