

Annexure C1

NOMINATION FORM

BEST FEMALE WORKER DAFF FEMALE ENTREPRENEUR AWARDS 2016/17-2018/19

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OI C			
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SECTION 1

Personal Information:

Name of nominee:
Name of nominator - Extension Official:
Name of the enterprise:
Name of owner:
Job title of the nominee(attach payslip):
Physical address:
ID (Attach copy) :
Postal address :
Banking details :
Contact numbers and e-mail address for the owner:
Contact number and e-mail address for a nominee :

SECTION 2

Enterprise Information:

2.1 Type of enterprise and background:
2.2 Specialised commodity:
2.3 Job responsibility of the nominee:

SECTION 3

Performance:

3.1 Teamwork:	
Ability to function independently and as	
part of a team, interpersonal skills, ability	
to motivate and encourage others and	
extent of providing feedback on work-	
related matters.	
3.2 Quality of work:	
Knowledge and understanding of	
enterprise activities and ability to adhere	
to set targets. Showcasing creativity and	
innovativeness of the worker.	
3.3 Conduct :	
Punctuality, absenteeism and working	
relations.	
3.4 Rexibility, Creativity and Innovation	
(suggestions on ways of improving work	
methods):	
Extent to which the worker accepts	
responsibility beyond her own job	
description and willingness to learn.	

SECTION 4

General information (for verification by the coordinator):

Hem	Yes	No
Do you own an enterprise?		
Do you do operational work?		
Are you related to the enterprise owner?		
Do you have a disability? (Question relates to the nominated worker)		
If the answer is yes, please indicate nature of disability		

Name of Owner:	***************************************
Signature:	Date:
Name of Nominee:	***************************************
Signature:	Date:
Name of the Nominator:	
Signature:	Date: