

## SAIPA MASTERY CIRCLE AWARDS – 2026

### NOMINATION FORM

#### Instructions:

1. Complete all sections of this form.
2. Attach supporting documentation (for example, CV, reference letters, and evidence of achievements).
3. Submit the completed form and supporting documents by **15 May 2026** to **awards@saipa.co.za**.
4. Use the subject line: *Nomination for [Award Category] – [Nominee's Name]*.

#### Section 1: Nominee Information

|                                                             |  |
|-------------------------------------------------------------|--|
| <b>Full Name</b>                                            |  |
| <b>SAIPA Membership Number</b>                              |  |
| <b>Job Title</b>                                            |  |
| <b>Company or Organisation</b>                              |  |
| <b>Sector (eg. Corporate / SME/ Academic/Public Sector)</b> |  |
| <b>Email address</b>                                        |  |
| <b>Phone Number</b>                                         |  |
| <b>Award Category</b>                                       |  |

#### Section 2: Nomination details

**You are welcome to provide these details as a supporting document**

1. **Summary of the Nominee's Achievements:**  
Provide a brief summary of why the nominee deserves this award. Include key accomplishments related to the award category criteria.
2. **Explanation of Achievements:**  
Share specific examples, outcomes, and evidence that align with the criteria for the selected award category. Be as detailed and specific as possible.
3. **Commitment to SAIPA Values and Ethical Leadership:**  
Describe how the nominee upholds SAIPA's values and contributes to ethical leadership in the profession.

### **Section 3: Supporting Documents**

Please attach the following documents:

Detailed CV or Company Profile

Reference Letters or Testimonials

Evidence of Achievements (e.g., articles, reports, publications, certifications)

### **Section 4: Nominator Information**

(Complete this section if you are nominating someone other than yourself.)

- **Full Name:**
- **Relationship to Nominee:**
- **Email Address:**
- **Phone Number:**

### **Section 5: Declaration**

By submitting this nomination, I confirm that the information provided is accurate to the best of my knowledge. I understand that the nominee's details may be used for promotional purposes related to the SAIPA Mastery Circle Awards.

Signature:

Name:

Date: