

# Nomination form

## of Discovery Health Medical Scheme (DHMS/the Scheme)



### Rules for completion of the nomination form

- 01** | The Board of Trustees of Discovery Health Medical Scheme ('DHMS/the Scheme') has appointed Deloitte & Touche ('Deloitte') as an Independent Electoral Body ('IEB') to assist the Nomination Committee, who will oversee the nomination process from a governance perspective.
- 02** | Deloitte has been appointed in the capacity of an IEB in respect of the following electoral processes and voting activities:
  - the call for nominations;
  - receiving and vetting of nominations;
  - preparation of final candidate list;
  - receiving and vetting of proxies; and
  - overseeing the actual election which will be conducted at the AGM to be held on 31 August 2021.
- 03** | **All nominations must be submitted directly to Deloitte only** using the attached prescribed nomination form. **Any nomination forms delivered to the Scheme Office, either by hand, e-mail or by fax, will not be considered.**
- 04** | Only Principal Members in good standing with DHMS may nominate other Principal Members ('nominees'). The person nominating ('nominator') must sign the nomination form and must be in good standing with DHMS (meaning that their contributions are up to date) as at the date of closing of the call for nominations, that being 24 May 2021.
- 05** | Only Principal Members in good standing with DHMS are eligible to stand for election. Nominees must be in good standing from the date of closing of the call for nominations, and remain so until the date of the elections.
- 06** | Principal Members may not nominate themselves to stand for election.
- 07** | The nomination form must also be signed by the nominee (the person being nominated to stand for election) indicating his/her acceptance of the nomination to stand for election. The nominee must also answer all relevant questions, submit all required documents and make all the necessary disclosures as indicated on the nomination form.
- 08** | The duly completed and signed nomination form, signed by both the nominator and nominee, must be accompanied by a detailed curriculum vitae of the nominee. The nomination form must be completed fully and properly to ensure that the nomination can be considered. Failure to complete the nomination form, or the failure to provide any document requested as part of the nomination process, may render the nomination invalid.
- 09** | For the purpose of vetting, the nominee is required to submit the following documents together with the completed and signed nomination form:
  - A detailed curriculum vitae;
  - A certified copy of the nominee's identity document;
  - A certified copy of the nominee's highest academic qualification;
  - Proof of the nominee's SARS personal tax clearance;
  - A recent high resolution photo of the nominee; and
  - An abridged curriculum vitae of no more than 100 words, and a short election manifesto not exceeding 200 words – the election manifesto will be subject to scrutiny by the Scheme's independent Nomination Committee.
  - The abridged curriculum vitae and manifesto must not exceed 300 words in total, for printing purposes. The abridged curriculum vitae, short manifesto and a photo will be published in a candidate booklet, which will be made available to all Principal Members of DHMS.

- 10 | Deloitte will review the submitted nomination form and the nominee's eligibility will be decided upon by the Nomination Committee, in terms of the Medical Schemes Act 131 of 1998, read with the Scheme Rules.
- 11 | The duly completed and signed nomination form, together with the required documents as discussed above, is required to reach Deloitte by **no later than 12:00 (midday) on Monday, 24 May 2021**. Nomination forms received after this date and time will not be considered.
- 12 | The nomination form and above documents should be submitted to Deloitte either by:
- Email (in PDF format) to [za\\_dhmselections2021@deloitte.co.za](mailto:za_dhmselections2021@deloitte.co.za);
  - Posted, in an envelope clearly marked **DHMS 2021 Trustee Elections, for the attention of Mrs Kavita Vanmali, Partner: Audit and Assurance**, to the following postal address:
    - Private Bag X6, Gallo Manor, 2052, South Africa  
*(please consider potential delays you may experience using the South African postal services which could result in your nomination form not reaching the IEB before the closing date and time, 12:00 (midday) on Monday, 24 May 2021)*
  - Physically delivered, in an envelope clearly marked **DHMS 2021 Trustee Elections, for the attention of Mrs Kavita Vanmali, Partner: Audit and Assurance**, to any of the following Deloitte offices:
    - Deloitte Johannesburg, 5 Magwa Crescent Waterfall City, Waterfall, Johannesburg, Gauteng, 2090
    - Deloitte Cape Town, The Ridge, 6 Marina Road, Portwood Distric, V&A Waterfront, Cape Town, 8000
    - Deloitte Durban, DTT Place, No.2 Pencarrow Crescent, Pencarrow Park, La Lucia Ridge Office Estate, La Lucia, Durban, KwaZulu Natal, 4051

The abovementioned Deloitte offices will only be open between 08:00 and 16:30, Mondays to Fridays, excluding Saturdays, Sundays and public holidays.

All nominations must be submitted using this prescribed nomination form and all requirements contained in the form must be fulfilled. Failure to complete the nomination form as prescribed may result in disqualification. Because the Scheme has appointed Deloitte as its IEB, all nomination forms must be delivered directly to the IEB either by hand or email, as indicated in these rules for completion of the nomination form.

*Nomination forms cannot be delivered to the DHMS Office. Any nomination forms delivered to DHMS' office either by hand, e-mail or by fax will not be considered.*



**SECTION 2: DISCLOSURES (TO BE COMPLETED BY THE NOMINEE)**

*Please tick the relevant box for each question*

**01 |** Have you ever been institutionalised in relation to, or suffered from, a mental illness which has rendered you incapable of managing your affairs? *If yes, please provide details.*

Y	N
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**02 |** Have you ever been declared insolvent or have you surrendered your estate for the benefit of creditors? *If yes, please provide details.*

Y	N
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**03 |** Have you applied for debt counselling or are you/ have you ever been under debt review? *If yes, please provide details.*

Y	N
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**04 |** Do you have any credit default action(s) pending against you? Do you have any default judgements against you? *If yes, please provide details.*

Y	N
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**05 |** Have you faced any civil litigation and/ or do you have any civil judgements against you? *If yes, please provide details.*

Y	N
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**06** | Have you ever had any allegations of crime levelled against you, and/ or been arrested, detained, accused, prosecuted and/ or convicted of a criminal offence, including the payment of an admission of guilt fine, in the Republic of South Africa or elsewhere, regardless of whether or not it has resulted in a period of imprisonment? *If yes, please provide details.*

Y	N
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**07** | Have you been subjected to any allegations or proceedings under any code of conduct or law relating to unethical practice(s)? Have you faced disciplinary action, litigation, or similar remedial action relating to your professional conduct? Have you been disqualified under any law or by any professional body from practicing your profession? *If yes, please provide details.*

Y	N
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**08** | Have you faced, or are you facing disciplinary or other remedial action in relation to misconduct, or have you been dismissed from any place(s) of employment? *If yes, please provide details.*

Y	N
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**09** | Have you faced, or are you facing legal, disciplinary or other remedial action that has, or may result in your removal from any office or position of trust? *If yes, please provide details.*

Y	N
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**10** | Have you ever been disqualified under any law, or the Rules of DHMS, or the rules of any other medical scheme or other institution, from holding the office of Trustee? *If yes, please provide details.*

Y	N
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**11 |** Have you ever been declared ineligible or disqualified as a director in terms of Section 69 of the Companies Act 71 of 2008? *If yes, please provide details.*

Y	N
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**12 |** Have you ever been removed by any Court or any other lawful authority from any office of trust on account of misconduct or any other improper conduct? *If yes, please provide details.*

Y	N
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**13 |** Have you previously held any directorships, trusteeships, been an officer or member of any form of governing body, member of a close corporation, principal officer, executive officer or a member of any board? *If yes, please provide details.*

Y	N
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**14 |** Are you currently holding any directorships or trusteeships? Are you an officer or member of any form of governing body, member of a close corporation, principal officer, executive officer or a member of any board? *If yes, please provide details.*

Y	N
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**15 |** Are you, or have you ever been an employee, director, officer, consultant, principal officer or other office bearer of any medical scheme? *If yes, please provide details.*

Y	N
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16 | Are you, or have you ever been associated with, a Politically Exposed Person ('PEP')? NOTE: A PEP is a person who is entrusted with political or public office or a prominent public function. *If yes, please provide details.*

Y	N
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17 | Are you an employee, director, officer, consultant or contractor of, or any person associated with, a community pharmacy, a wholesale pharmacy, a group of pharmacies, a manufacturer of medicines and/ or complementary medicines, a manufacturer of medical devices and/ or medical consumables, distributor and/ or wholesaler of medicines, complementary medicines, medical devices or medical consumables? *If yes, please provide details.*

Y	N
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18 | Are you an employee, director, officer, consultant or contractor of a private hospital, or hospital owning or operating group, or a pathology laboratory, or pathology owning or operating group? *If yes, please provide details.*

Y	N
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19 | Are you an employee, director, officer, consultant, contractor or person associated with a supplier of goods or services (including a relevant health service), to the Scheme or its administrator or to the holding company, subsidiary, joint venture or associate of its administrator, where the supply of such services and goods forms a significant percentage of the supplier's business (in excess of 25% of gross revenue shall be deemed to be 'a significant percentage' of the supplier's business)? *If yes, please provide details.*

Y	N
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***Should the space provided for your explanations not be sufficient, please feel free to attach additional explanations on a separate page.***

