



**NOMINATION FORM: ZIMBABWE GENDER COMMISSION**

I, ..... (full names), hereby nominate Dr/  
Mr/ Mrs/ Ms/ Miss/ Rev. .... for appointment  
to the **Zimbabwe Gender Commission**.

Nominator’s Signature: .....

Nominator’s Contact Details:      Address: .....  
.....  
.....  
.....

Telephone Number .....

Cell Phone Number .....

Email Address .....

**Instructions:**

1. Please use one form for each nomination
2. Attach to each nomination form, the nominee’s comprehensive curriculum vitae and a written justification, as outlined in the call for nominations advert, of the suitability of the nominee.
3. Completed nomination forms shall be hand delivered to Parliament Building, Corner Nelson Mandela Avenue / Third Street or posted to The Clerk of Parliament, P.O.Box CY 298, Causeway, Harare. Alternatively, the nomination forms can be emailed to [hrvacancies@parlzim.gov.zw](mailto:hrvacancies@parlzim.gov.zw)
4. All nomination forms which do not meet the requirements outlined above and submitted after the closing date shall be disqualified.