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NOMINATION FORM

[Deadline is October 27, 2018]

**179TH CCG 5-DAY CORPORATE GOVERNANCE TRAINING COURSE FOR DIRECTORS
SAROVA WHITESANDS BEACH RESORT, MOMBASA, NOVEMBER 5-9, 2018**

Name of Company/Institution: _____

**Physical and
Postal Address:** _____

Email Address: _____

Telephone Number: _____

Company's KRA PIN No: _____

Contact Person: _____

We nominate the following Directors/Managers for your 179th CCG 5-Day Corporate Governance Training Course for Directors to be held at the Whitesands Beach Resort and Spa, Mombasa, from November 5-9, 2018.

NB: PLEASE ENSURE THAT NAMES ARE WRITTEN IN FULL & CORRECTLY SPELT

NAME OF CHAIRMAN/DIRECTOR/CEO/MANAGER/OFFICER	DESIGNATION

Once the Centre for Corporate Governance accepts all our nominees, we shall remit to the Centre the costs of the training course amounting to the equivalent of **Kshs. 135, 000 (US\$ 1,350)** exclusive of 16% VAT per Participant. We do hereby confirm that the nominee(s) has/have accepted and will be available to attend and participate at the training course.

Signed:
NAME OF NOMINATING OFFICER: _____

DESIGNATION: _____

SIGNATURE: _____