



GOVERNMENT GAZETTE

OF THE

REPUBLIC OF NAMIBIA

N\$2.24

WINDHOEK - 30 May 2001

No.2541

CONTENTS

	<i>Page</i>
GENERAL NOTICES	
No. 119 Optometric Board: Invitation for submission of nominations of candidates for election as members	1
No. 120 Dental Technology Board: Invitation for submission of nominations of candidates for election as member	3
No. 121 Radiography Board: Invitation for submission of nominations of candidates for election as member	6

General Notices

No. 119

2001

OPTOMETRIC BOARD: INVITATION FOR SUBMISSION OF NOMINATIONS OF CANDIDATES FOR ELECTION AS MEMBERS

Notice is hereby given that an election of seven members of the Optometric Board is to be held in terms of section 5 of the Allied Health Services Professions Act, 1993, (Act No. 20 of 1993).

Nominations of eligible optometrists, optical dispensers or orthoptists as candidates for election are invited. All nominations must be delivered or transmitted to the address of the returning officer stated below so as to be received at that address not later than 16h00 on 10 July 2001.

GENERAL NOTICES:

1. Any registered optometrist, optical dispenser or orthoptist resident in Namibia, who is not disqualified in terms of section 6 of the Allied Health Services Professions Act, 1993 to be elected as a member of the Board, is eligible for nomination.

2. Nominations must be made on a nomination form substantially in the form of Form 2 of the Regulations Relating to the Election of Members of the Optometric Board under the Allied Health Services Professions Act, 1993. Nomination forms can be obtained from the returning officer.
3. Each candidate must be nominated on a separate nomination form.
4. Every registered optometrist, optical dispenser and orthoptist is entitled to sign nomination forms in respect of any number of candidates not exceeding the number to be elected.
5. Each nomination form must state the full names of the person nominated and must be signed by two other persons who are registered optometrists, optical dispensers or orthoptists. The person nominated must also sign the form confirming that he or she consents to be nominated. The registered address and qualifications of each signatory must be given on the form. If the person nominated is unable to sign the nomination form he or she may transmit his or her consent to the returning officer by letter, telegram or telefacsimile, so as to be received by the returning officer not later than the cut-off date and time for the submission of nominations.

E BARLOW
RETURNING OFFICER
OPTOMETRIC BOARD
P O BOX 50021
BACHBRECHT
WINDHOEK
FAX: (061) 227607
TEL: (061) 203-2839

**OPTOMETRIC BOARD:
NOMINATION FORM**

We, the undersigned, being registered optometrists, optical dispensers or orthoptists, hereby nominate

of, a registered optometrist/optical dispenser/orthoptist*, as a candidate for election as member of the Optometric Board.

* Delete which is not applicable

1. Full names:

Signature: Date:

Registered Profession:

Registration Number:

Registered Address:

.....

2. Full names:

Signature: Date:

Registered Profession:

Registration Number:

Registered Address:

.....

I, (Full names)

the undersigned, consent to my nomination as candidate for election as a member of the Optometric Board.

.....
Signature Date

.....
Registered profession and registration number

.....
Registered address

No. 120

2001

**DENTAL TECHNOLOGY BOARD:
INVITATION FOR SUBMISSION OF NOMINATIONS OF
CANDIDATES FOR ELECTION AS MEMBER**

Notice is hereby given that an election of one member of the Dental Technology Board is to be held in terms of section 7(2) of the Allied Health Services Professions Act, 1993, (Act No. 20 of 1993).

Nominations of eligible dental technologists as candidates for election are invited. All nominations must be delivered or transmitted to the address of the returning officer stated below so as to be received at that address not later than 16h00 on 10 July 2001.

GENERAL NOTICES:

1. Any registered dental technologist resident in Namibia, who is not disqualified in terms of section 6 of the Allied Health Services Professions Act, 1993 to be elected as a member of the Board, is eligible for nomination.
2. Nominations must be made on a nomination form substantially conforming to Form 2 of the Regulations. Nomination forms can be obtained from the returning officer.
3. Each candidate must be nominated on a separate nomination form.
4. Every registered dental technologist is entitled to sign nomination forms in respect of any number of candidates not exceeding the number to be elected.
5. Each nomination form must state the full names of the person nominated and must be signed by two other registered dental technologists. The person nominated must also sign the form confirming that he or she consents to be nominated. The registered address and qualifications of each signatory must be given on the form. If the person nominated is unable to sign the nomination form he or she may transmit his or her consent to the returning officer by letter, telegram or telefacsimile, so as to be received by the returning officer not later than the cut-off date and time for the submission of nominations.

**E BARLOW
RETURNING OFFICER
DENTAL TECHNOLOGY BOARD
P O BOX 50021
BACHBRECHT
WINDHOEK
FAX: (061) 227607
TEL: (061) 203-2839**

Form 2

DENTAL TECHNOLOGY BOARD:
NOMINATION FORM

We, the undersigned, being registered dental technologists, hereby nominate
..... of
a registered dental technologist, as a candidate for election as member of the Dental
Technology Board.

1. Full names:
Signature: Date:
Registration number:
Registered Address:
Witness: (name and address)
.....

2. Full names:
Signature: Date:
Registration number:
Registered Address:
Witness: (name and address)
.....

I, (Full names)

the undersigned, consent to my nomination as candidate for election as a member of the
Dental Technology Board.

.....
Signature Date

.....
Registered address

.....
Registration number

No. 121

2001

**RADIOGRAPHY BOARD:
INVITATION FOR SUBMISSION OF NOMINATIONS OF
CANDIDATES FOR ELECTION AS MEMBER**

Notice is hereby given that an election of one member of the Radiography Board is to be held in terms of section 7(2) of the Allied Health Services Professions Act, 1993, (Act No. 20 of 1993).

Nominations of eligible radiographers as candidates for election are invited. All nominations must be delivered or transmitted to the address of the returning officer stated below so as to be received at that address not later than 16h00 on 10 July 2001.

GENERAL NOTICES:

1. Any registered radiographer resident in Namibia, who is not disqualified in terms of section 6 of the Allied Health Services Professions Act, 1993 to be elected as a member of the Board, is eligible for nomination.
2. Nominations must be made on a nomination form substantially conforming to Form 2 of the Regulations Relating to the Election of Members of the Radiography Board under the Allied Health Services Professions Act, 1993. Nomination forms can be obtained from the returning officer.
3. Each candidate must be nominated on a separate nomination form.
4. Every registered radiographer is entitled to sign nomination forms in respect of any number of candidates not exceeding the number to be elected.
5. Each nomination form must state the full names of the person nominated and must be signed by two other registered radiographers. The person nominated must also sign the form confirming that he or she consents to be nominated. The registered address and qualifications of each signatory must be given on the form. If the person nominated is unable to sign the nomination form he or she may transmit his or her consent to the returning officer by letter, telegram or telefacsimile, so as to be received by the returning officer not later than the cut-off date and time for the submission of nominations.

**E BARLOW
RETURNING OFFICER
RADIOGRAPHY BOARD
P O BOX 50021
BACHBRECHT
WINDHOEK
FAX: (061) 227607
TEL: (061) 203-2839**

Form 2

**RADIOGRAPHY BOARD:
NOMINATION FORM**

We, the undersigned, being registered radiographers, hereby nominate
..... of
a registered radiographer, as a candidate for election as member of the Radiography Board.

1. Full names:
Signature: Date:
Registration number:
Registered Address:
Witness: (name and address)
.....

2. Full names:
Signature: Date:
Registration number:
Registered Address:
Witness: (name and address)
.....

I, (Full names)
the undersigned, consent to my nomination as candidate for election as a member of the
Radiography Board.

.....
Signature Date

.....
Registered address

.....
Registration number
