

(To be printed on applicant's institution/Organisation letterhead)

Form 1b: Declaration of Authorised Person The following resolution was passed at a meeting of the Board of Directors of < Company Name > (Hereinafter referred to as "the Company") on the <Day> of <Month> <Year>. It was resolved that: <Named Officer 1">, <ID number> , or failing him, <Named Officer 2, <ID number> be hereby duly authorised to represent Name of your organisation/institution to conduct dealings with the SERVICES SETA in relation to the 2024-25 Discretionary Grant Application. Signed ______ on this the _____day of _____ 2024 Director/Board Member **Named Officer (Authorised Person)** (Signature) (Signature) Witness 1: _____ Witness 2: ______ For purposes of communication the following contact details should be used: **Full Names of Authorised Person:** Tel no: Cell no: Email: **Physical address:**