COMPETENT PERSON INFORMATION FORM (CPIF\_Date completed/signed)

|  |  |  |
| --- | --- | --- |
| Name |  | |
| Designation  Company |  | |
| Academic qualifications |  | |
| GSSA Membership number |  | |
| Membership number of SACNASP registration (if applicable) |  | |
| Membership number of any other Professional or Statutory body (if applicable) |  | |
| CPD | *Identify the CPD system being followed (GSSA/SACNASP/Other).* | |
| Agreement to submit to Code of Ethics and Complaints Procedure | YES | (YES means that the CP agrees that any (negative) outcome of a complaint may be made public on the GSSA website and/or in the Annual Report). This is a requirement of Chartered status. |
| Commodity specialisation, years of experience and sign-off capacity |  | |
| Experience Summary | **I have a minimum of FIVE years relevant post-Graduate experience in the deposit types and mineralisation styles indicated above, including at least TWO years in a role requiring exercise of professional judgement.**   * *The above statement must be included as a bare minimum. Additional detail can be included as required.* | |
| Country experience | *List of countries where the CP/CV has operational and/or consulting experience.* | |
| Public Reporting experience | *List of Codes that the CP/CV has experience in preparing public reports.* | |
| Formal training courses in respect of any reporting code or Ethics | * *List the formal training programmes you have attended. Certificates of completion may be required.* | |
| Other relevant information (*optional*) | *Any other information that the CP/CV may wish to put on record* | |
| Three references/sponsors | 1. Name (current company) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature 2. Name (current company) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature 3. Name (current company) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature | |
| Details of Complaints/Suspensions | *Details of any complaints levied against the CP in the past 5 years and the outcome.* | |

**Declaration**

I, **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_,** declare that the above information is current, complete, accurate and not misleading.

* I have not been censored by any professional/statutory body with respect to any Public or Private Report compiled by me or under my guidance (if not true, then supply details).
* I am not currently the subject of a professional standards complaint by any professional or statutory body (if not true, then supply details).
* I have not been refused admission to any professional or statutory body (if not true, then supply details).
* My membership/registration has not been suspended/terminated by any professional or statutory body (if not true, then supply details).
* I have not been found guilty of a breach of the Code of Ethics or other professional misconduct by any professional or statutory body (if not true, then supply details).
* I have not been refused professional indemnity insurance from any organisation or company. I have, or am able to acquire, such insurance without any qualifications (if not true, then supply details).

*Any relevant details with respect to the above declaration*

* The following documents, supplied by me in the application process, may be provided on request by the GSSA.
  + Current CV
  + Current CPD Report
* I am aware that any information supplied by me, which is incorrect or misleading, may disqualify me from Chartered membership and may result in a formal complaint being laid with the GSSA Ethics Committee.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Signature** **Date**

Review of applicant for Chartered Membership by Sponsor/Reference

## NOTES:

* This document must be fully completed and signed by the sponsor/reference (typed in this form in Word format).
* The document must then be converted to pdf format by the sponsor/reference and returned to the applicant for lodgement on the website.
* Any form not signed and dated by the sponsor/reference will not be considered valid.
* This document will not form part of the public profile of the applicant but may be made available on request by any valid party requesting access for the purposes of investigation of a complaint for professional/ethical misconduct, or as otherwise required by law.

## Personal details of applicant

|  |  |
| --- | --- |
| **Name, Surname:** |  |
| **Contact email** |  |
| **Contact telephone** |  |

## Personal details of Sponsor/Reference

|  |  |
| --- | --- |
| **Name, Surname:** |  |
|  |  |
| **Professional Organisation (GSSA)** |  |
| Membership No: |  |
| Membership status (Fellow, Member etc.): |  |
| Continuous years of membership: |  |
|  |  |
| **Statutory Registration** |  |
| Registration No: |  |
| Registration status (Professional, etc.): |  |
| Continuous years of registration: |  |
|  |  |
| **Professional Organisation (Other)** |  |
| Membership No: |  |
| Membership status: |  |
| Continuous years of membership: |  |
|  |  |
| **Educational Qualifications** |  |
| Highest degree obtained: |  |
| University: |  |
| Year: |  |

## Career summary of Sponsor/Reference

|  |  |  |  |
| --- | --- | --- | --- |
| Current Company: | Date From: | Date To: | Position Held: |
|  |  |  |  |
| Previous: | Date From: | Date To: | Position Held: |
|  |  |  |  |
| Previous: | Date From: | Date To: | Position Held: |
|  |  |  |  |
| Previous: | Date From: | Date To: | Position Held: |
|  |  |  |  |

## List any SAMCODE activities or code-related courses or conferences that you have attended in the past 5 years.

|  |  |
| --- | --- |
| 1. |  |
| 2. |  |
| 3. |  |
| 4. |  |

# Assessment of applicant

1. My knowledge of the applicant is based on the below interaction during the period

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ to \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Describe the interaction you have had with the applicant, including but not limited to (please type your answers in the box below)
2. The nature of your relationship (e.g., as an employer, client, co-worker, supervisor, mentor, Lead CP, etc.).
3. Your personal knowledge of their academic/technical qualifications and experience, including the field in which they practice (e.g., geophysics, hydrogeology, Mineral Resource/Reserve estimation, Mineral Asset Valuation, Oil & Gas, commodity specialisation, signoff capacity, etc.).
4. The level of responsibility and professional judgement of the applicant
5. The number of projects and/or the number of years you have worked with the applicant.
6. Your assessment of their competence (academic and technical knowledge, skills and attitudes) in your interaction with the applicant.
7. Any other comments/motivation to aid the GSSA to assess the applicant.
8. My overall assessment of the applicant’s knowledge and competence, based on personal knowledge and experience is:

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Above average 1 | Average 2 | | Below Average 3 | | No personal knowledge 4 | | |
| Ability to accept responsibility | |  | | Quality of work | |  |
| Application of scientific principles, methods and techniques | |  | | Scientific and/or technical judgement | |  |
| Professional/Ethical conduct | |  | | Attitude toward profession | |  |

1. Do you know of any reason why the applicant should not be granted Chartered status with the GSSA? If so, please give details
2. Do you have personal knowledge on any complaint upheld against the applicant in terms of professional or ethical misconduct that would disqualify him/her from Chartered status with the GSSA?
3. Please confirm that you have seen the applicants completed CPIF and signed same.

## Declaration

|  |  |  |
| --- | --- | --- |
| I………………………………………………………………………………………. (**Please type name and surname**) declare that this sponsor/referee report submitted to the GSSA is my own work in design and execution and has not been influenced by any internal or external factors. | | |
|  |  |  |
| Signature |  | Date |

### For Office Use only

|  |  |
| --- | --- |
| Date received at office |  |
| Additional information requested |  |
| Date approved |  |