12th African Regional Meeting

Johannesburg, South Africa, 11–14 October 2011

AFRM.12

Form for credentials of delegations¹

	Name of country ²					
Mr/Ms	Surname (family name)	Minister attending (First name (personal name)	the Meeting Position/title			
Accon Mr/Ms	npanied by: Surname (family name)	First name (personal name)	Position/title	Ministry/institution		

¹ Each Regional Meeting shall be composed of two Government delegates, one Employers' delegate, and one Workers' delegate for each State or territory invited by the Governing Body of the International Labour Office to be represented at it (article 1, paragraph 1, of the Rules for Regional Meetings – bold type added). The nomination of other types of participants is optional. As regards technical advisers, it should be borne in mind that there is only one item on the agenda.

² State or territory invited.

Government delegates

1.	Mr/Ms	Surname (family name)	First name (personal name)	Position/title	Ministry/institution
2.					

Advisers

Mr/Ms	Surname (family name)	First name (personal name)	Position/title	Ministry/institution	Substitute delegate? ³

Employers' delegate

Mr/Ms	Surname (family name)	First name (personal name)	Position/title	Organization

Advisers

Substitute delegate? ³

³ Please indicate **yes** if the adviser is also nominated as a substitute delegate. *An adviser who is acting as substitute for his/her delegate may speak and vote under the same conditions as the delegate who is being replaced* (Art. 1, para. 4, of the *Rules for Regional Meetings*).

Workers'	de	legate
----------	----	--------

Mr/Ms	Surname (family name)	First name (personal name)	Position/title	Organization

Advisers

Mr/Ms	Surname (family name)	First name (personal name)	Position/title	Ministry/organization	Substitute delegate? ⁴

Other information

The information requested below, concerning the employers' and workers' organizations consulted for the nomination of the delegation as well as the extent to which the government has paid the participation expenses of the tripartite delegation, is necessary for the Credentials Committee to discharge its functions.

Organizations consulted for the nomination of the delegation

Employers' or	ganizations		
Workers' orga	nizations		

⁴ Please indicate **yes** if the adviser is also nominated as a substitute delegate. An adviser who is acting as substitute for his/her delegate may speak and vote under the same conditions as the delegate who is being replaced (Art. 1, para. 4, of the Rules for Regional Meetings).

Payment of expenses of the delegation

Please cross the appropriate box

Expenses paid for the w	hole delegation			
Expenses paid for part of	of the delegation			
Please indicate, for each Government:	n group, the numbe	er of persons whose	e expenses have been borne b	by the
Part of the expenses pai	d for the whole de	legation \square		
Please indicate the expe				
Part of the expenses pair	d for part of the de	elegation \square		•••••
Please indicate, for each type of expenses paid (t		-	e expenses have been paid an	nd the
Done in		, on	[2011]	
	Signature			
	Name			• • • • • • • •
	Function			

Please return this form, duly signed by the appropriate government authority, at the latest by Monday, 26 September 2011, to:

Office of the Legal Adviser International Labour Office CH-1211 Geneva 22 Fax: +41 22 799 84 70

Email (attach scanned image of signed original): credentials@ilo.org