**ISACA South Africa Chapter Volunteer Application**

**Personal Details**

Full Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

ISACA ID: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mobile Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email Address\*: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Province: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\*All correspondence regarding this application will be sent to this email address

**Interests**

We’d like to know a bit more about your volunteering interests, as ISACA South Africa Chapter offers a wide variety of volunteer opportunities for you to choose from. Please indicate the areas which are of interest to you.

Regional Events SAQA Accreditation

Student Events Digital Strategy

Workshop Events Writing Policies

Exam site visits Member Engagement

Writing Articles Secretarial and Office work

**Subject Matter Expertise**

Please list topics in which you hold subject matter expertise (examples: COBIT®, ITIL®, COSO®, cloud computing, regulatory issues, etc.)

(Please limit your answer to under 500 words.)

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Please describe your industry expertise relevant to your interest in serving as an ISACA volunteer:  
(Please limit your answer to under 500 words.)

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Please describe the value you feel you can provide to ISACA:

(Please limit your answer to under 500 words.)

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Please describe your reasons for volunteering at ISACA.

(Please limit your answer to under 500 words.)

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Indicate the time you are available on average to commit to ISACA South Africa Chapter volunteer activities per month:

1 - 5 hours 6 - 10 hours 10 – 15 hours 15+ hours

Indicate the period during which you are able to commit to volunteer for ISACA South Africa Chapter:

3 months 6 months 12 months 24 months

**Volunteer Experience (other than ISACA)**

**Organisation #1**

Please provide name of organization, position held and year(s) served

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Responsibilities and Accomplishments for the volunteer experience described above   
(Please limit your answer to under 500 words.)

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**Organisation #2**

Please provide name of organization, position held and year(s) served

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Responsibilities and Accomplishments for the volunteer experience described above   
(Please limit your answer to under 500 words.)

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**Professional Expertise**

Please indicate your area(s) of Professional Expertise. (Tick all applicable)

Assurance Audit

Compliance Governance

Privacy Risk

Security/Cybersecurity

**Please accept my application**

I am interested in volunteering for ISACA South Africa Chapter. If appointed, I will abide by ISACA's Code of Ethics and ISACA South Africa Chapter’s Participation Agreement.

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Signature