

Nominator

**TITLE:**  Mr  Mrs Ms Other (*Please indicate) *

**FIRST NAME:  SURNAME: **

**POSITION:  FACILITY: **

**ORGANISATION: **

**ADDRESS: **

**SUBURB:  STATE  POST CODE **

**PHONE  FAX: **

**EMAIL **

Award Nomination

**Please tick the relevant category**

Trainee

Volunteer

Employee

Organisation

Human Resource Management

Gareth Williamson Sustainability

Aboriginal and Torres Strait Islander Cultural Competencies Award

Please complete the following page and address the nomination criteria as specified in each Award category.

Please supply electronically 1 copy of all documentation for use by the Judging Panels.

Email to [events@acs.asn.au](mailto:events@acs.asn.au)

Supplementary material can be mailed to ACS, PO Box 3124, Rhodes NSW 2138

Please include a suitable photograph of the Nominee.

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**SIGNATURE:  DATE: **

Two Referees for Nomination

Referee One

**TITLE:**  Mr  Mrs Ms Other (*Please indicate) *

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Referee Two

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**EMAIL: **

**SIGNATURE:  DATE: **

The Employee award recognizes the dedication and contribution of an individual employee in the delivery of services to older people and people with disability.

***This category is***

***sponsored by***

**Length of employment **

**Please outline the employee’s role within your organisation**

****

**Describe how the Employee has excelled in care provision **

**Describe how the Employee’s commitment and dedication has been reflected in practice **

**Any other information you consider relevant to this nomination **

**Please provide a short paragraph to be used for an announcement of this nomination **

***This category is***

***sponsored by***

***This category is***

***sponsored by***