

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.

Nominator

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

**FIRST NAME:  SURNAME: **

**POSITION:  FACILITY: **

**ORGANISATION: **

**ADDRESS: **

**SUBURB:  STATE  POST CODE **

**PHONE:  FAX: **

**EMAIL: **

**SIGNATURE:  DATE: **

Two Referees for Nomination

Referee One

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

**FIRST NAME:  SURNAME: **

**POSITION:  FACILITY: **

**ORGANISATION: **

**ADDRESS: **

**SUBURB:  STATE  POST CODE **

**PHONE:  FAX: **

**EMAIL: **

**SIGNATURE:  DATE: **

Referee Two

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

**FIRST NAME:  SURNAME: **

**POSITION:  FACILITY: **

**ORGANISATION: **

**ADDRESS: **

**SUBURB:  STATE  POST CODE **

**PHONE:  FAX: **

**EMAIL: **

**SIGNATURE:  DATE: **

**NOMINATION FORM –**

**Aboriginal & Torres Strait Islander Cultural Competencies Award**

This award recognises a non-Aboriginal or Torres Strait Islander provider organisation that demonstrates excellence in Aboriginal and Torres Strait Islander Cultural competencies

**Provide a brief outline of your organisation (services, clients, history etc)**

****

**Describe how your organisation has demonstrated excellence in providing a culturally appropriate environment for Aboriginal and Torres Strait Islander clients and/or staff **

**Provide examples of how Organisational policies and procedures have supported the inclusion of Aboriginal and Torres Strait Islander clients and/or staff **

**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***