**SPECIAL OLYMPICS NEW ZEALAND**

**Distinguished Service Award**

**Nomination Form**

|  |  |  |
| --- | --- | --- |
| **Section 1: Details of Nominee** | | |
| **Full Name** | | |
| **Other names known by** | | |
| **Postal Address**  *Please include postal code*  **Contact Person**  *(if Nominee is a company or body corporate)* | | |
| **Section 2: Details of Nominator** | | |
| **Full Name** | | |
| **Contact Person** *(if Nominator is other than an individual)* | | |
| **Telephone Number**  **Email Address** | | |
| **Postal Address**  *Please include postal code* | | |
| **Names of other Nominators providing details of Nominees’ service**  *Refer Section 3* | **Contact Person** | **Contact Details** |
| **SECTION 3: Supporting Statement** | | | |
| **To be completed by Nominator** | | | |
| *State (in 600 words or less) why you believe the Nominee should be considered for a Distinguished Service Award. This statement should also provide an assessment of the QUALITY of the contribution that has been made.* ***Note: a separate supporting statement is to be provided by each nominator.*** | | | |

|  |  |
| --- | --- |
| **SECTION 4: Supporting Documentation** | |
| **To be completed by Nominator** | |
| *Supporting Documentation attached*  *YES/NO (delete one)*  *List of Supporting Documentation included in this application* | |
| **Signature of Nominator** | **Date** |

**NOMINATIONS CLOSE 5PM THURSDAY 31ST OCTOBER 2019**

**Submission of Nomination Form**

**By Post:**

Special Olympics New Zealand Awards Sub-Committee, PO Box 38344, Wellington Mail Centre, Lower Hutt 5045

**By Courier:**

Special Olympics New Zealand Awards Sub-Committee, Pelorus Trust Sports House, 93 Hutt Park Road, Seaview, Lower Hutt

**By Email:**

admin@specialolympics.org.nz

***Please refer to the Nomination Overview when completing this form***