

# AWARDS NOMINATION FORM

## APPLICANT

Entity / Unit: \_\_\_\_\_

Address: \_\_\_\_\_

Head of Organization/Director: \_\_\_\_\_

Tel: \_\_\_\_\_ Email: \_\_\_\_\_

## CATEGORY

Category you are applying for: \_\_\_\_\_

## CONFIRMATION BY APPLICANT

(Nomination Forms should be signed either by the CEO / CFO / COO / Head of Department of the respective Entity / Unit)

I/We hereby confirm the nomination and acknowledge that I/We will be required to supply relevant information and financial documents for the judging process.

Full Name & Designation: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_ Date: \_\_\_\_\_

Signature & Company Seal

Additional/Supplementary Information Attached? Yes \_\_\_\_\_ No \_\_\_\_\_

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