

**2021 Brenda Gabe**

**Leadership Award**

Nomination Form

### Please read the ‘Nomination Guidelines’ before completing this form.

### If you are nominating someone else, please speak to them first to make sure they are happy to be nominated.

* 1. ***Your details (the “Nominator”):***

|  |  |
| --- | --- |
| Information required | Your response |
| Preferred pronoun: | [ ]  She / her[ ]  They / them [ ]  He / him |
| First name: |  |
| Family name: |  |
| Postal address: |  |
| Suburb: |  |
| State: |  |
| Post code: |  |
| Best contact number: |  |
| Email:  |  |
| Relationship to Nominee: |  |

* 1. ***Nominee details:*** *(if nominating yourself, please write “as above” in the Self-Nomination box)*

Individual:

|  |  |
| --- | --- |
| Information required | Your response |
| Self-Nomination |  |
| Preferred pronoun: | [ ]  She / her[ ]  They / them [ ]  He / him |
| First name: |  |
| Family name: |  |
| Postal address: |  |
| Suburb: |  |
| State: |  |
| Post code: |  |
| Best contact number: |  |
| Email:  |  |
| Relationship to Nominee: |  |

Group:

|  |  |
| --- | --- |
| Information required | Your response |
| Name of Group: |  |
| Group Representative |  |
| Preferred pronoun: | [ ]  She / her[ ]  They / them [ ]  He / him |
| First name: |  |
| Family name: |  |
| Postal address: |  |
| Suburb: |  |
| State: |  |
| Post code: |  |
| Best contact number: |  |
| Email:  |  |
| Relationship to Nominee: |  |

**2.**

|  |
| --- |
| Please provide a 50-word (maximum) summary of the nominee’s achievements |
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**3.**

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| --- |
| Where did you first hear about the Brenda Gabe Leadership Award? |
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1. ***Documentation***

### Please include the items 1 to 4 listed below in your application as separate documents.

### The judging panel will use items 1 to 3 to make their decision:

**Nomination Statement**

1.

### In 1,000 words or less, please provide a summary of why this candidate or group is being nominated for the Brenda Gabe Leadership Award.

**Letters from two Referees**

### Please fill out the contact details of two referees at the end of this form and provide a letter of support from each referee.

**Additional Materials** (if available)

### Please provide any supporting documentation (for example: newspaper articles, website material, etc). If the information is from a website, please provide the relevant web link.

**Photograph**

WDV will then use item the 50-word profile summary and photograph for publicity and to show at the award presentation. The award will be presented at the WDV Annual General Meeting being held on the 26th October 2021

**Please make sure the nominee approves the 50-word profile summary and photograph submitted.**

1. ***Declaration***

I have read and understood the Nomination Guidelines for the Brenda Gabe Leadership Award.

I have attached the required documentation.

*If nominating someone else:*

I am happy for my name to be mentioned as the Nominator for this Nominee.

The Nominee has approved the Nominee Profile Summary and photo attached to this form.

Signature of Nominator:

Date:

1. **Referee Details**

*Referee 1:*

|  |  |
| --- | --- |
| Information required | Your response |
| Preferred pronoun: | [ ]  She / her[ ]  They / them [ ]  He / him |
| First name: |  |
| Family name: |  |
| Postal address: |  |
| Suburb: |  |
| State: |  |
| Post code: |  |
| Best contact number: |  |
| Email:  |  |
| Relationship to Nominee: |  |

*Referee 2:*

|  |  |
| --- | --- |
| Information required | Your response |
| Preferred pronoun: | [ ]  She / her[ ]  They / them [ ]  He / him |
| First name: |  |
| Family name: |  |
| Postal address: |  |
| Suburb: |  |
| State: |  |
| Post code: |  |
| Best contact number: |  |
| Email:  |  |
| Relationship to Nominee: |  |