



## AWARD NOMINATION FORM

### Individual nominee details

Full name:	Current Appointment:
School/Unit:	Award Category:
Partner (if collaborated):	
Project/Research Title:	
Contact number:	Email:

### Team Details (if you are nominating the department/unit/school)

Full name	Department/Unit/School	Current Appointment
1.		
2.		
3.		
4.		
5.		
6.		
7.		
8.		
9.		

Collaborative Project/Research Title:	
Contact number:	Email:

Name, Position & Organisation:	
Professional relationship:	
Contact number:	Email:
Signature:	Date of submission:

**Nominator**

Name:	
Signature:	
School:	Email:

**Head of the Unit/Department** (of the nominee)

Name:	
Signature:	
School:	Email:

**Executive Dean** (of the nominee)