

TRAINEE AND APPRENTICE AWARDS

NOMINATION DETAILS AND DECLARATION

Please ensure that you have answered all questions and attached to this form together with copies of any supporting documents.

APPRENTICE OF THE YEAR

TRAINEE OF THE YEAR

NOMINEE:

Name of Apprentice / Trainee

Address

Phone (work)

Mobile

Phone (A/H)

Email

Course / Certificate

Enrolment Date

Name of Registered Training Organisation

PLEASE TURN OVER

NOMINATION DETAILS AND DECLARATION (CONTINUED)

NOMINATOR:

Name of Employer

Name of Supervisor / Manager

Business Address

Contact Name

Title / Position

Phone

Email

NOMINEE TO COMPLETE:

I agree to the conditions of entry as detailed in this document and the attached nomination documents.

Signature

Name

Date
