

Rotary Club of Belconnen, Inc.  
P.O. Box 76 Jamison ACT 2614

**PRIDE OF WORKMANSHIP AWARD NOMINATION FORM**

Name of Company or Employer \_\_\_\_\_

Business Address \_\_\_\_\_

Telephone (\_\_\_\_\_) \_\_\_\_\_ Fax (\_\_\_\_\_) \_\_\_\_\_

Nature of Business \_\_\_\_\_

Contact at Business \_\_\_\_\_

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Full Name of Nominee \_\_\_\_\_

Telephone (\_\_\_\_\_) \_\_\_\_\_ Fax(\_\_\_\_\_) \_\_\_\_\_

E-mail of Nominee \_\_\_\_\_

Employed as \_\_\_\_\_

State why you are nominating the employee for the "Pride of Workmanship" Award. Your statement should be worded in a form suitable for reading as a short citation for the Awardees at the presentation.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Does the nominee consent to the nomination?      YES/NO

Name of Nominator \_\_\_\_\_ Signature of Nominator \_\_\_\_\_

E-mail address or Postal address \_\_\_\_\_