

# Nominations Form

## Individual Awards



### CATEGORIES

Please tick the appropriate box

#### KOORIE ONLY CATEGORIES

- ☐ Community Based Employee
- ☐ Private Sector Employee
- ☐ Public Sector Employee

#### OPEN CATEGORIES

- ☐ Teacher / Trainer

### NOMINEE DETAILS

Surname:	<input type="text"/>	Given name:	<input type="text"/>
Address :	<input type="text"/>	Postcode:	<input type="text"/>
Email :	<input type="text"/>		
Phone (home):	<input type="text"/>	(work)	<input type="text"/>
		(mobile)	<input type="text"/>

### EMPLOYER DETAILS

Surname:	<input type="text"/>	Given name:	<input type="text"/>
Address :	<input type="text"/>	Postcode:	<input type="text"/>
Email :	<input type="text"/>		
Phone (home):	<input type="text"/>	(work)	<input type="text"/>
		(mobile)	<input type="text"/>

### NOMINATOR DETAILS

Surname:	<input type="text"/>	Given name:	<input type="text"/>
Address :	<input type="text"/>	Postcode:	<input type="text"/>
Email :	<input type="text"/>		
Phone (home):	<input type="text"/>	(work)	<input type="text"/>
		(mobile)	<input type="text"/>

I give permission for the Victorian Aboriginal Education Association Incorporated (VAEAI) to use my photograph for any VAEAI publications and/or promotional materials in any print, audio, video or other medium that may be taken should I be a finalist at the 2024 VAEAI Wurreker Awards.

Signature of Nominee:	<input type="text"/>	Date:	<input type="text"/>
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