



ROTARY SHINE AWARD NOMINATION FORM
(Closing date 14th March '24)

Please Print, Complete, Scan & email to Rotarian: alan.lean44@gmail.com

Who are you nominating?	
Name	

Tick one:

Are they an **employee** or **worker**? (Can be casual, part time or permanent)
 Or a **business/employer**?

EMPLOYEE DETAILS		EMPLOYER DETAILS	
Address		Address	
Phone		Phone	
Email		Email	

How do you know this person?	How do you know this employer?
<input type="checkbox"/> My employee <input type="checkbox"/> Friend/Relative <input type="checkbox"/> Client <input type="checkbox"/> Other <i>(Please provide details:)</i> <hr/>	<input type="checkbox"/> They are my employer <input type="checkbox"/> They employ a relative/friend of mine <input type="checkbox"/> I am a customer of theirs <input type="checkbox"/> They employ a client of the support agency I work for <input type="checkbox"/> Other <i>(Please provide details)</i> <hr/>

WHY DOES THIS PERSON DESERVE A SHINE AWARD? *Include details such as number of years employed, attitude to work, challenges overcome, achievements, interests, community/sporting involvement etc.*

WHY DOES THIS EMPLOYER DESERVE A SHINE AWARD? *Include details as to support/assistance provided, willingness to make adjustments or accommodations where necessary, opportunities provided for further skill development & number of employees with disability employed (Corporate employers)*

Has this person or business agreed to be nominated?

Yes

No

Your details:

NAME	
BUSINESS NAME	
ADDRESS	
PHONE	
EMAIL	

Media permission:

Are you & your nominee willing to be photographed for media? **You** **Nominee**

Are you & your nominee available to attend the presentation ceremony
on Wednesday 27th March 2024? **You** **Nominee**

Please Scan & email to alan.lean44@gmail.com