



Palliative Care New South Wales Awards 2010

Nomination Form

1. Award Categories (Please tick one)

- | | | |
|---|--|--|
| <input type="checkbox"/> 1. Leadership in Palliative Care (sponsored by Calvary Health Care Sydney) | <input type="checkbox"/> 4. Volunteers Supporting Palliative Care | <input type="checkbox"/> 6. Excellence in provision of Palliative Care within a RACF |
| <input type="checkbox"/> 2. Outstanding contribution to Specialist Palliative Care (the Quiet Achiever Award) | <input type="checkbox"/> 5. Excellence in provision of Primary (non-Specialist) Palliative Care within a Non-Specialist Care setting | <input type="checkbox"/> 7. Significance in Palliative Care Research (sponsored by Sacred Heart) |
| <input type="checkbox"/> 3. Innovation in Palliative Care Practice | | |

2. Nominee Details

Nominee's Title (Ms, Mr, Mrs, Dr, Rev etc).....

Name of Nominee.....

Nominee's Address.....

Nominee's Contact Phone Number.....

Nominee's Email.....

Nominee's Employer.....

Employer's Address.....

Nominee's role in the Organisation.....

Does Nominee agree to be nominated? (Please circle) Yes No

3. Nominator Details

Name of Nominator.....

Your Relationship to Nominee.....

Nominator's Address.....

Business Hours Phone..... Mobile Phone.....

Email (essential for receipt).....

PCNSW Membership No. (you must be a member to be eligible to enter).....

4. Nomination Criteria

Why do you think this nominee should receive the award? You **MUST** address the Award Criteria specified in the Criteria and Process document. **Attach/email a statement of no more than 500 words**

Nominator's Signature.....

5. Lodgment of Nomination

Email: info@palliativecarensw.org.au (include your name and nominee's name) or Fax: 02 9206 2094

NOMINATIONS CLOSE 30 APRIL 2010

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