

VICTORIAN TEACHER/TRAINER OF THE YEAR AWARD

NOMINATION FORM

*Nominations close Friday 15 May 2009.

NOMINEE DETAILS: (please print clearly)

Note: Where a group or team is involved, give details here for the coordinator or contact person.

Surname:	Given Name:	
Private Address:		P/code:
Phone (work):	Phone (home):	
Mobile:	Email Address:	
Position/Title:		Department:
Employer/RTO:		
Employer/RTO Address:		P/code:

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OTHER GROUP/TEAM MEMBERS DETAILS: (if applicable)

Surname:	Given Name:	
Position/Title:		Phone (work):
Email Address:		

Surname:	Given Name:	
Position/Title:		Phone (work):
Email Address:		

NOMINATOR DETAILS:

Name:		Position/Title:
RTO/Organisation:		
Postal Address:		P/code:
Phone (work):	Fax:	Mobile:
Signature of Nominator:		Date:

ENDORSED BY CEO/DIRECTOR OF EMPLOYER/RTO:

Signature:	Name:	Date:
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I am applying for the **VICTORIAN TEACHER/TRAINER OF THE YEAR AWARD** and agree:

- to the conditions of entry for the Victorian Training Awards as detailed in the nomination booklet and on the www.skills.vic.gov.au/awards
- that in the case of selection as a finalist or winner, photographs and non-confidential details from the nomination can be used in promotional materials by the Department of Innovation, Industry and Regional Development.

Signature:	Name:	Date:
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