**Spotlight Award Nomination Form**

*Shining a Light on Extraordinary Performance*

**Please read the guidelines before completion of the form.**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Section A – for completion by Nominator** | | | | |
| **Please indicate whether you wish to nominate an Individual  or Team** | | | | |
| **Whom do you wish to nominate?** | | | | |
| **Name:** | | | **Job Title:** | |
| **School/Lead Area/Unit:** | | | | |
| **Which Team do you wish to nominate?** | | | | |
| **Team:** | | | | |
| **School/Lead Area/Unit:** | | | | |
| **Nominated by:** | | | | |
| **Name:** | **Job Title:** | | | |
| **Date:** Click here to enter a date. | | | | |
| **Choose which category the nomination applies to** | | | | |
| * For a specific and one-off achievement | | | |  |
| * For consistent contributions and performance above and beyond expectations | | | |  |
| * For exceptional dedication to learning, assessment and teaching | | | |  |
| **Citation:**  Introduction:  Click or tap here to enter text.  Background:  Click or tap here to enter text.  Reason for the Award:  Click or tap here to enter text.  Impact:  Click or tap here to enter text. | | | | |
| **Section B – endorsed by Director of School/Head of Unit** | | | | |
| **Endorsed by:**  **Name:**  **Signed:** | | **Job Title:**  **Date:** Click here to enter a date. | | |

****