Lifetime Achievement Award 2021

NOMINATION FORM

Please print neatly

1. Name & surname of nominator: …….

2. LIASA membership number: ……. (if applicable)

3. Present job title: …… (if applicable)

4. Institution: …… (if applicable)

5. Tel/Cell: ……..Fax: ……

6. Email: ……..

Details of the Nominee

1. Surname: ……

2. First name(s): ……..

3. LIASA membership no. (Past no. if no longer active): …….. (if applicable)

4.. Gender: Male Female

5. Date of birth: ……ID no.: ……..

6. Postal address: ……Code:……

7. Email address: ……

8. Telephone: (……..) ……..Fax: (…….) ……

9. Cell number: ……

10. References

(i) Name: ……

Tel.: ……Email: ……..

(ii) Name: ……..

Tel.: …… Email: ……..

…… ……

Signature of nominator Date

Please email the completed form to salitrust@liasa.org.za or post it to SALI Trust, P O Box 38220, Faerie Glen, 0043 on or before 13 August 2021.

Lifetime Achievement Award 2021

*To be completed by the **Nominee***

I……
hereby accept the nomination and conditions attached to the SALI Trust - LIASA Lifetime Achievement Award and acknowledge that the information supplied is true.

…….. ……
Signature of nominee Date

Confidential motivation statement by the nominator. (Maximum of 200 words).
Please use more paper as required for the motivation statement.

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…….. ……
Signature of nominator Date

Endorsed by: …… ……..
Name Signature

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