

Nominee's Details:

1. Individual

Surname:

First Name:

Address:

Suburb:

Postcode:

Home Phone:

Business Phone:

Mobile Phone:

Email:

Or

2. Group

Name of group:

Group representative -

Surname:

First Name:

Address:

Suburb:

Postcode:

Home Phone:

Business Phone:

Mobile Phone:

Email:

Documentation

Please read the 'Nomination Requirements' before proceeding with your nomination.

In no more than 1,000 words, please provide a summary of why this woman or group is being nominated for the Biennial Brenda Gabe Leadership Award. (Tip – please speak with your nominee first.)

For publicity and research purposes, please consult with your nominee to provide a 50 word (maximum) summary of achievements. This may be used on a PowerPoint slide at WDV's AGM.

Is there any additional documentation to support this nomination? Newspaper articles, photographs, etc. Please attach documentation. For website materials, please provide the relevant link, or appropriate download.

- No
- Yes

Declaration

- I have read and understood the Nomination Requirements of the Biennial Brenda Gabe Leadership Awards
- I am willing for my name to be mentioned as the nominator for this nominee

Name:

Signature:

Date:

Sending your nomination

Please forward this completed form, along with any supporting documentation to Bridget Jolley at Women with Disabilities Victoria:

By Post:

Bridget Jolley
Women with Disabilities Victoria
GPO Box 1160
Melbourne, Vic, 3001

By Email:

Bridget.Jolley@wdv.org.au