NETBALL COUNTIES MANUKAU REGION
Nomination for Service Award

Service Awards recognize individuals who have made an outstanding contribution to the game of Netball which has enhanced the game regionally and/or nationally. A centre or the NCMR Regional Board may nominate any person who it considers has the requisite qualifications. The nomination must be made on this form and forwarded to the Regional Manager of Netball Counties Manukau Region to be received on or before 5.00 pm on 30 November 2010.

The following points should be noted when submitting a nomination:

- Nominees will normally hold a Centre Service Award.
- Paid work shall not be excluded but the contribution needs to exceed this.
- A minimum of ten years' significant contribution shall be expected.
- Service may be accumulated from different centres and from different parts of the game.
- Service must be verified by each of the centres concerned.

Section 1: DETAILS OF NOMINATION

Details of Nominee		
Full Name of Nominee		
Give any other names that the Nominee may have been known by		
Address of Nominee		
Awards held for Service	Name of Award	Date awarded
Local Netball awards National Netball awards International awards		
Nominating Centre/NCMR Board		
Name of Nominating Centre		
Contact Person for Nominating Centre (signature below)		
Names of other Centres providing details of service	**Centre**	**Contact Person**
Signature	Date	

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Section 2: RECORD OF NETBALL SERVICE

Note: a separate sheet must be completed for each centre and/or union in which service has been given. The information supplied should provide names of positions held or qualifications gained and the dates for which these apply.

Name of Nominee			
Name of Centre/Union for which service below applies			
Player	*Local & Regional - detail experience at NPC level or higher*		*Dates*
Umpire/Tester	*Local & Regional - detail experience at regional level or higher*		*Dates*
Coach/Manager	*Local & Regional - detail experience at representative age grade or above*		*Dates*
Administration	**Voluntary**	*Local &Regional*	*Dates*
	Paid		
Other	*Detail any other experience or service considered relevant*		*Dates*
If you are unable to verify that any information above is correct, please mark this with an asterisk (*) and state below the reasons for this.			
On behalf of the above centre I verify that the above information is accurate and correct. Signed Position Name Date			

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Section 3. SUPPORTING STATEMENT
This statement must be provided by the nominator.

Name of Nominee	
Name of Centre making Nomination	
State why you believe this person should be considered for a Service Award. This statement must provide an assessment of the **quality** of the contribution that has been made.	
Signed	Date