



Tauranga Netball Centre  
**Service Award**  
 Nomination Form 2021

Please refer to the "Service Award – Nomination Guidelines", before completing this nomination form.

**SECTION 1: SERVICE AWARD NOMINEE DETAILS**

|   |  |
|---|--|
| Full Name   |  |
| Address   |  |
| Home Phone Number   |  |
| Mobile Phone Number   |  |
| Email Address   |  |
| Number of Years Nominee has been a member of Harbourside/Tauranga Netball |  |

**SECTION 2: NOMINATOR DETAILS**

|  |  |
|--|--|
| Name of Club or School (if applicable)   |  |
| Full Name of Nominator (if individual)<br><b>OR</b><br>Full Name of Contact Person and designation (if Club or School) |  |
| Address  |  |
| Home Phone Number  |  |
| Mobile Phone Number  |  |
| Email Address  |  |

### **SECTION 3: SERVICE DETAILS**

|   | <b>Area of Service</b><br>(Administration, Coaching,<br>Managing, Umpiring, Playing or<br>Volunteering) | <b>Details</b><br>(Include position titles and responsibilities) | <b>Dates</b> |
|---|---|--|--------------|
| 1 |   |  |              |
| 2 |   |  |              |
| 3 |   |  |              |
| 4 |   |  |              |
| 5 |   |  |              |
| 6 |   |  |              |

### **SECTION 4: PAID WORK**

|  |          |
|--|----------|
| Has any of the service been as a paid employee of Tauranga Netball Centre? | Yes / No |
| If yes, which positions and dates.   |          |

### **SECTION 5: FUTURE SERVICE**

|  |          |
|--|----------|
| Do you expect the nominee to continue to provide service to Tauranga Netball Centre in the future? | Yes / No |
| If yes, please state the likely area(s) of involvement in the future.                              |          |

## **SECTION 6: SUPPORTING STATEMENT**

*Provide any supporting details that will assist with the assessment of the quality of the contribution that the nominee has made to Tauranga Netball. If more space is required, please attach additional pages.*

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|  |
|--|

## **SECTION 7: VERIFICATION**

*If the nominator is a school or club, it is necessary to have two (2) representatives to verify the nomination.*

I/We verify that the information provided on this nomination form is true and correct to the best of my/our knowledge.

|                                 |  |
|---------------------------------|--|
| Signed:<br>Nominator Full Name: | Signed:<br>2 <sup>nd</sup> Nominator Full Name:<br>(If a school or club) |
| Date:                           | Date:  |

*Nominations are to be submitted to the **Tauranga Netball Awards Committee (TNCAC)**, to be received no later than 5pm on **5<sup>th</sup> November 2021**. This nomination is to be marked "Confidential" and can be submitted as follows:*

*By Email: [manager@tauranganetball.co.nz](mailto:manager@tauranganetball.co.nz)*