

NOMINATION FOR THE UNIVERSITY OF WAIKATO DISTINGUISHED ALUMNI AWARD

PLEASE PRINT

	Title	Surname	First names
Nominee's full name:			

Mailing address:

Postal code:	Email:
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Phone: Home: () Business: ()

Nominee's current position/occupation:

Nominee's educational attainment at The University of Waikato. (Please specify degree(s), year(s) of graduation and specialisation(s) if known

Other honours, awards, or offices held, with dates, if known:

	Title	Surname	First names
Nominator's full name:			

Mailing address:

Postal code:	Email:
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Phone: Home: () Business: ()

Nominator's qualification and year of graduation (if applicable)

Signature of nominator: Date:

SUPPORTING STATEMENTS

Please provide at least three statements of support for this nomination from yourself, colleagues, friends, community leaders or others. Please limit to 500 words each on a separate sheet and attach any supporting information or documentation. Include significant achievements and reasons why your nominee should be considered for a Distinguished Alumni Award.

The supporting statements for this nomination are from the following persons:

(At least two supporting signatures and statements are required).

1. <input type="text"/>	2. <input type="text"/>
3. <input type="text"/>	4. <input type="text"/>

Supporting statements for the nomination need to include:

- Supporter's full name and title
- Supporter's current contact details (including mailing address, phone number and email address)
- Supporter's own qualification and year of graduation (if applicable)

For more copies of this form please visit www.waikato.ac.nz/distinguished-alumni