

Queen's Royal College Old Boys' Association HALL OF HONOUR – 2015 NOMINATION FORM

Section 1 - NOMINEE DETAILS

SURNAME		FIRS	T NAME				
OTHER NAMES							
OCCUPATION/PROFESSION							
TITLE (please tick) - MR.	MRS	MISS	MS	OTHER. e.g. Dr.			
EMAIL ADDRESS			_				
TEL. # HOME	BUSINESS			MOBILE			
I <u>f</u> nomi	nee is deceased p	rovide conta	ct informatio	on of surviving relatives			
NAME OF RELATIVE							
EMAIL ADDRESS							
TEL. # HOME				MOBILE			
				NG THE NOMINATION			
	MRS	MISS	MS	OTHER. e.g. Dr.			
HOME / POSTAL ADDRESS							
BUSINESS ADDRESS							
EMAIL ADDRESS			_				
TEL. # HOME	BUSINESS			MOBILE			
DATE		SIGNATUI	RE		_		



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SECTION 3 - INFORMATION ON NOMINEE

Please provide information including dates of the nominee's contributions and achievements, which distinguish the nominee
from others in the field(s) of activity locally, regionally or internationally. (Information submitted should not exceed 500 words)



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SECTION 4 - CONFIRMATION

Please provide hereunder the names and contact information of two other persons who can independently confirm the above information on the nominee.

SURNAME				FIRST	NAME		
TITLE (please tick) -	MR	MRS	MISS		MS	-	OTHER. e.g. Dr.
HOME / POSTAL ADDRESS							
EMAIL ADDRESS							
TEL. # HOME		BUSINESS_				MOBILE	
SURNAME				FIRST	NAME		
TITLE (please tick) -	MR	MRS	MISS		MS	_	OTHER. e.g. Dr.
HOME / POSTAL ADDRESS							
EMAIL ADDRESS							
TEL.# HOME		BUSINESS_				MOBILE	

Completed nomination forms must be submitted by 31st July 2015 to:

The Secretary,

Awards Sub-Committee, Queen's Royal College Old Boys' Association,

P.O. Box 2070, National Mail Centre, 240-250 Golden Grove Road, Piarco, Republic of Trinidad and Tobago, West Indies

The Awards Sub-Committee considers duly completed nominations and makes recommendations to the Board of Directors of the Queen's Royal College Old Boys' Association.