**Surrey Care Awards 2019 Nomination Form**

**Please refer to the Awards Rules, Judging Criteria and FAQs at** [**https://www.surreycare.org.uk/**](https://www.surreycare.org.uk/about-sca/surrey-care-awards/surrey-care-awards-2019)**, before completing this form (Click on Link above). Nominees must read the Awards Rules before signing this form.**

**This completed nomination form and its supporting documents must be submitted as one single pdf document to** [**Awards@surreycare.org.uk**](mailto:Awards@surreycare.org.uk) **by Monday 9th September 2019. The pdf file name must include Organisation, Category, Nominee Name e.g. AnyProvider\_CareManager\_JoeBloggs.pdf**

**Please put Awards Nomination and the name of the nominee in the subject line of your email.**

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| **Nominee’s Name** |  | | |
| **Job title** |  | **Date job started** |  |
| **Nominee’s email** |  | **Phone** |  |
| **Qualifications Achieved** |  | | |
| **Nominee’s Employer & Address including postcode** |  | | |

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| **Nominator’s Name**  **& Job title** |  | | |
| **Employer organisation (if different from Nominee)** |  | | |
| **Nominator’s email** |  | **Phone** |  |

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| --- | --- |
| **Awards Category 2019** |  |
| **Nominee’s signature**  *.* | *By signing, Nominees are confirming they have read and agreed to the Rules of the Surrey Care Awards 2019* |
| I, the Nominee, agree to my nomination being submitted to BBC Surrey Community Heroes Awards/Great British Care Awards at the discretion of the judges *(please circle****)* YES NO** |
| **Nominator’s signature** | *By completing and returning this form I agree that the information contained in this form can be held and maintained by Surrey Care Association Ltd and its agent Loud Communications Ltd in accordance with the GDPR 2018. The information will be used for the purposes of promoting the Awards and may be used in pre and post event publicity in local and national media. The information will be kept in digital and hard copy format for up to 1 calendar year for use in in-house analysis. For more information please refer to SCA’s privacy policy on our website.* |

***Funds raised from this event will be used by SCA in accordance with its remit to support the providers of adult social care according to its constitution.***

**Surrey Care Awards 2019 Employer /Peer Statement**

***Please give a short description of the type service you provide including client category (e.g. older people) and the size of your organisation:***

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| **Awards 2019 Category** |  |
| **Nominee (s) Name** |  |
| **Nominator /Employer Name** |  |
| **1**. **How long have you known the nominee(s) and in what capacity?** |  |
| **2. Please say why you are nominating this individual/team/provider, with reference to the numbered Judging Criteria set out for this Award.** |  |

**Surrey Care Awards 2019 Supporting Statement**

***Maximum of 3 supporting statements, no more than 300 words each. Please scan any attachments such as handwritten items, emails, brochures or photos and include as part of the single pdf document to be submitted to support this nomination***

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| **Awards 2019 Category** |  |
| **Nominee**  **Name** |  |
| **Name of person submitting supporting statement(s)** |  |
| **Supporting statements, following the guidance for this Award as outlined in the Judging Criteria** |  |

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| --- | --- |
| **Awards 2019 Category** |  |
| **Nominee**  **Name** |  |
| **Name of person submitting supporting statement(s)** |  |
| **Supporting statements, following the guidance for this Award as outlined in the Judging Criteria** |  |

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| --- | --- |
| **Awards 2019 Category** |  |
| **Nominee**  **Name** |  |
| **Name of person submitting supporting statement(s)** |  |
| **Supporting statements, following the guidance for this Award as outlined in the Judging Criteria** |  |