# ASCILITE Life Member Award Nomination Form

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| --- | --- |
| Nomination year: |  |
| Name of Nominee: |  |
| Nominee’s Institution: |  |
| Nominee’s Email: |  |
|  |  |
|  |  |
| Is the Nominee aware of this nomination: | YES | NO |

## Declaration

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ [full name of nominator] hereby nominate \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ [name of nominee] for an ASCILITE Life Member Award. This nomination is seconded by \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ [full name of seconder].

## Nominee’s Contribution, Leadership & Governance

Details of significant and sustained contribution of nominee to the core activities and key directions of ASCILITE (maximum 200 words):

Details of demonstrated leadership and integral role played in the implementation of ASCILITE activities and strategic objectives (maximum 200 words):

Details of governance roles played by nominee (maximum 200 words):

## Nominator Details

|  |  |  |
| --- | --- | --- |
| Nominator’s Signature: |  |  |
| Nominator’s Institution: |  |  |
| Nominator’s Email: |  |  |
| Date: |  |  |

## Seconder Details

|  |  |  |
| --- | --- | --- |
| Seconder’s Signature: |  |  |
| Seconder’s Institution: |  |  |
| Seconder’s Email: |  |  |
| Date: |  |  |

Please Note: All signatories to this nomination form must be current financial members of ASCILITE.

Please return this form by email to secretariat@ascilite.org by the due date indicated on the ASCILITE website.