

Please consult the Alumni Achiever Awards Policy document. Last date for submission: Tuesday, 31 July 2018.

**STRONG nomination motivations and sufficient support material are important!**

Submit form via e-mail: [paul.geswindt@mandela.ac.za](mailto:paul.geswindt@mandela.ac.za), fax: 041 504 1417 or deliver to the Alumni Relations Centre, North Campus, Summerstrand, Port Elizabeth.

## PART 1: ACHIEVER AWARDS Nomination Form 2018

### Nominator information

Title		First name	
Surname			
Postal address			
			Code
E-mail			Cell/Tel
Year graduated		Qualification/s	
Occupation			
How are you acquainted with the nominee?			

### Nominee contact information

Title		First name	
Surname			
Postal address			
			Code
E-mail			Cell/Tel
Year graduated		Qualification/s	
Occupation			
Short nomination statement by nominator			

CV included of nominee	<input type="checkbox"/>	YES	<input type="checkbox"/>	NO
Supporting material included	<input type="checkbox"/>	YES	<input type="checkbox"/>	NO
Letters of support included	<input type="checkbox"/>	YES	<input type="checkbox"/>	NO

Signed		Date	
--------	--	------	--

Please consult the Alumni Achiever Awards Policy document. Submit nomination by Tuesday, 31 July 2018.  
Submit form via e-mail: [paul.geswindt@mandela.ac.za](mailto:paul.geswindt@mandela.ac.za), fax: 041 504 1417 or deliver to the Alumni Relations Centre, North Campus, Summerstrand, Port Elizabeth..

## PART 2: ACHIEVER AWARDS Support Forms 2018

### 1. Nomination supporter / seconder information

<b>Title</b>		<b>First name</b>	
<b>Surname</b>			
<b>Postal address</b>			
		<b>Code</b>	
<b>E-mail</b>			<b>Cell/Tel</b>
<b>Year graduated</b>		<b>Qualification/s</b>	
<b>Occupation</b>			
<b>Comments</b>			

<b>Signed</b>		<b>Date</b>	
---------------	--	-------------	--

**Please consult the Alumni Achiever Awards Policy document. Submit nominations by Tuesday, 31 July 2018.**

Submit form via e-mail: [paul.geswindt@mandela.ac.za](mailto:paul.geswindt@mandela.ac.za), fax: 041 504 1417 or deliver to the Alumni Relations Centre, North Campus, Summerstrand, Port Elizabeth.

## 2. Nomination supporter / seconder information

<b>Title</b>		<b>First name</b>	
<b>Surname</b>			
<b>Postal address</b>			
		<b>Code</b>	
<b>E-mail</b>			<b>Cell/Tel</b>
<b>Year graduated</b>		<b>Qualification/s</b>	
<b>Occupation</b>			
<b>Comments</b>			

<b>Signed</b>		<b>Date</b>	
---------------	--	-------------	--