FORMAT FOR NOMINATIONS FOR WCDM-DRR AWARDS

(Please fill out this form to nominate for an award).

1. Choose the field for Award for your nominee				
•	ominee/sponsoring agency choosing himself or referring or ellent work in management of Covid 19, will fill up as follows:			
2. Reason For Nominatio	n (Not more than 100 words)			
achievements in the nominate	nominee deserves the selected award(Please cite the ed field and how it has brought about change and impacted the iety in long run. The combined write up should not exceed more			
Achievements/Areas of Accomplishment (Provide names of projects, programs, inventions, concepts, ideas, work done in the field with year)				
Elaborate on how the nominee made a significant contribution				
Elaborate on how the nominee demonstrated outstanding professionalism/innovation				
Changes brought about/ Impact at large:				

4. Nominee Information

Nominee's Name		Surname	Middle	First Name
Phone number		Area Code	Phone number	
E-mail address				
Postal address with Pin code	Office			
	Residence			
Present Employment	Field			
	Nominee's Technical/Professional Activities			
	Employer			
	Designation			
	Period of employment			
	DM Experience/ Role as Responder			
Reference 1*	Name			
	Designation			
	Address			
	Phone No.			
	E-mail I'd			
Reference 2*	Name			

Designation	
Address	
Phone No.	
E-mail I'd	

(Note: *The reference must be aware about your achievements as he may be consulted in the evaluation process of your nomination.)

P.S: Please attach CV / Organisational Profile along with additional documentation deemed necessary along with important photographs