



Oxfordshire Care Awards 2019 Nomination Form

One entry form per nomination. All fields must be completed.

Category of Award being entered (*please tick one only*)

- | | |
|--|---|
| <input type="checkbox"/> Newcomer to Care Award | <input type="checkbox"/> Registered Manager Award |
| <input type="checkbox"/> Care Home Worker Award | <input type="checkbox"/> Register Nurse Award |
| <input type="checkbox"/> Home Care Worker Award | <input type="checkbox"/> Long Term Service Award |
| <input type="checkbox"/> Community Services Worker Award | <input type="checkbox"/> Oxfordshire Hero Award |
| <input type="checkbox"/> Care Employer Award | |

Name of person completing this form:

Name of Nominee:

Name of Nominee's employer:

Is the person completing this form...

- A colleague? Related to the Nominee? A client of the Nominee?
- Other relationship (*please specify*)
-

Have you informed the Nominee of their nomination? Yes No

Statement of nomination (maximum of 400 words)

- Your statement should describe why you think the Nominee should win the Award. Please refer to the Judging Criteria on the Entry Guidance.
- No other supporting materials will be considered except testimonials.
- An additional typed testimonial from a colleague and/ or/ service user and/ or/ family carer (maximum 1 A4 sheet per testimonial) is desirable.
- Please make sure that the name of the Nominee, their Employer and the Award Category is included on all supporting information.
- Attach all pieces of supporting information to this entry form and post to:
OACP | 9/ 10 Napier Court | Barton Lane | Abingdon | OX14 3YT
- Or send by email to: jane.wood@oacp.org.uk. Any queries please contact Jane Wood: 01635 202345
We will acknowledge all submissions.

DEADLINE FOR NOMINATIONS: 4PM, FRIDAY 15TH FEBRUARY 2019
(Please note any nominations received after this time will not be considered or acknowledged)

