

# THE ROB GEORGE AWARD NOMINATION FORM



AWARD SUMMARY
<b>ELIGIBILITY</b>
All currently accredited Triathlon Australia Technical Officials are eligible for nomination for this award.
<b>CRITERIA</b>
Recognition of the valuable contributions made to the Technical Program in their home state by individual Technical Officials.
Demonstration of key characteristics of the nominees (similar to Rob George): <ul style="list-style-type: none"><li>- Well organised and dependable</li><li>- Fair</li><li>- Positivity and a team player</li><li>- Problem solver</li><li>Empathy, guidance to others, mentoring skills</li></ul>
Demonstration of key activities of the nominees: <ul style="list-style-type: none"><li>- Demonstrated a high personal commitment to the technical program at a local level</li><li>- Encouraged the growth of triathlon at grassroots level</li><li>- Provided mentoring and peer support to other Technical Officials</li><li>- Successfully collaborated with Race Directors and Clubs to improve the safety and quality of events in their state</li></ul>
<b>LENGTH OF SERVICE</b>
Typically, has been an active Technical Official for at least three years and has consistently surpassed the minimum number of events required to maintain their accreditation.
<b>PROCESS</b>
All members of Triathlon Australia may nominate an individual for this award.
Each STTA will assess nominations received and submit one candidate that they feel is deserved of the award to the Triathlon Australia Awards Committee.
This award is to only be awarded if there is a nominee who sufficiently satisfies the selection criteria. Therefore, there may not be a nominee or award recipient from each State and Territory every year.
Up to 8 winners.
<b>TIMING</b>
Nominations can be submitted at any time during the year and must be received by 28 <sup>th</sup> of February 2020 for consideration at the following year's awards ceremony.

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Name of Nominee
STTA
Length of service
Criteria How has the nominee demonstrated the desired key characteristics
Criteria Examples of how has the nominee demonstrated the desired key activities
Supporting statement

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Person making this nomination:		
Name:		
Signature:		
Date:		
Contact details of three referees who are able to make direct comment on this nomination		
Name 1:		
Phone:		
Email:		
Name 2:		
Phone:		
Email:		
Name 3:		
Phone:		
Email:		

_____	_____	____/____/____
Signature	Printed Name	Date
STTA President		