

**2021 AWARDS NOMINATION**

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| **Awards Category:** | **RISK SPECIALIST OF THE YEAR** |
| **NOMINEE’S INFORMATION** |
| 1. | Who are you nominating? |
|  |  |
| 2. | What is their current Job Title? |
|  |  |
| 3. | How long have they been in this role? |
|  |  |
| 4. | Who is their employer (Organisation Name)? |
|  |  |
| 5. | What is their risk background? |
|  |  |
| 6. | Nominee’s Phone number |
|  |  |
| 7. | Nominee’s Cellphone number |
|  |  |
| 8.  | Nominee’s Email Address |
|   |  |
| 9. | What is their formal educational background? |
|  |  |
| 10. | What is their field of specialisation? |
|  |  |
| **NOMINATOR’S INFORMATION** |
| 11. | Nominator’s Name |
|  |  |
| 12. | Relationship to the Nominee (e.g. Employee/Colleague/Manager) |
|  |  |
| 13. | Nominator’s Phone number |
|  |  |
| 14. | Nominator’s Cellphone number |
|  |  |
| 15. | Nominator’s Email Address |
|  |  |
| **RATIFICATION** |
| 16. | Who is the Nominee’s Senior? (directly reports to) - Name and Title |
|  |  |
| 17. | Senior’s Phone number |
|  |  |
| 18. | Senior’s Cellphone number  |
|  |  |
| 19. | Senior’s Email Address |
|  |  |
| 20. | Who does the Nominee’s Senior report to? - Name and Title |
|  |  |
| 21. | Has the Nominee’s Senior approved the nomination? |
|  |  |
| 22. | Who is the CRO (Chief Risk Officer)? |
|  |  |
| 23. | Has this nomination been approved by the Organisation? |
|  |  |
| **NOMINATION DETAILS** |
| 24. | Describe the Nominee’s attributes |
|  |  |
| 25. | What are the Nominee’s professional accomplishments? (Please list and provide a summary of each) |
|  |  |
| 26. | What initiatives is the Nominee currently working on that will significantly impact the risk management industry / organisation? (Please list and provide a summary of each) |
|  |  |
| 27. | What is the next step on the Nominee’s Risk Management career path? |
|  |  |
| 28. | How is the Nominee contributing to the industry by knowledge-sharing / mentoring etc.? |
|  |  |
| 29. | Please supply a motivation (Executive Summary - minimum one and maximum two pages) |
|  |  |

*I declare the information provided to be true and correct.*

*I acknowledge that false or inaccurate information could disqualify the nomination.*

***NOTE: Once this form is completed, please email this form to*** ***communications@irmsa.org.za***