

# NZIAHS AWARDS NOMINATION FORM

Please complete the Nomination Form and return it,  
together with supporting documents as required for that award, to

NZIAHS Awards Committee  
P.O. Box 121-063,  
Henderson.  
WAITAKERE CITY

With the support of the Committee and Members of the \_\_\_\_\_ Section,

we hereby nominate \_\_\_\_\_

for:

- |  |   |
|--|---|
| <input type="checkbox"/> Honorary Life Member            | <input type="checkbox"/> Sir Arthur Ward Trophy                                   |
| <input type="checkbox"/> Honorary Fellow                 | <input type="checkbox"/> AGMARDT Technology Transfer Award                        |
| <input type="checkbox"/> Fellow                          | <input type="checkbox"/> NZIAHS Science Award                                     |
| <input type="checkbox"/> NZIAHS Jubilee Award            | <input type="checkbox"/> Convention Travel Award                                  |
| <input type="checkbox"/> NZIAHS Emerging Scientist Award | <input type="checkbox"/> Ravensdown Best Paper Awards                             |
| <input type="checkbox"/> NZIAHS Postgraduate Award       | <input type="checkbox"/> New Faces Award NZIAHS/SIR Publishing – Best Publication |
| <input type="checkbox"/> Doug Campbell Award             | <input type="checkbox"/> N.Z. Horticultural Advancement Trust                     |

*(tick the appropriate nomination)*

Full Name of Nominee: \_\_\_\_\_

Membership Class of Nominee: \_\_\_\_\_

Nominator: \_\_\_\_\_

Signature: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Signature: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_