Essex Chronicle Media GROUP LIMITED

ESSEX Achievers 2009

Susie Cornell

Nomination Form-
Going the Extra Mile

Name and address of the person you are nominating

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Their telephone number……Their age……...

Your name and address

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……

Your telephone number……

Please note: The nominee must be aware of your nomination and agree to newspaper and radio publicity.

Please state why you feel the person you are nominating deserves an award. Please note: Applications will only be accepted on this form and one other sheet of A4 Paper. Do not send any additional information at this stage. Please note that where multiple applications are received from one organisation, only one application per organisation will be considered.

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Criteria: Those who make an outstanding contribution to the community beyond the tasks they would normally undertake in their work or otherwise.

Please return this form to **Lynda Jones, PA to the Commercial Director, Essex Chronicle Media Group Ltd., Westway, Chelmsford, Essex by no later than June 1, 2009**

Essex Chronicle Media Group would like to keep you informed of additional products and services which may be of interest. Please tick this box if you do not wish to receive this information ☐

Essex Chronicle Media
GROUP LIMITED

ESSEX Achievers 2009

Susie Cornell

Nomination Form-
Against the odds

Name and address of the person you are nominating

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Their telephone number……Their age……...

Your name and address

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Your telephone number……

Please note: The nominee must be aware of your nomination and agree to newspaper and radio publicity.

Please state why you feel the person you are nominating deserves an award. Please note: Applications will only be accepted on this form and one other sheet of A4 Paper. Do not send any additional information at this stage. Please note that where multiple applications are received from one organisation, only one application per organisation will be considered.

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Essex Chronicle Media
GROUP LIMITED

ESSEX Achievers 2009

Susie Cornell

Nomination Form-
Young champion

Name and address of the person you are nominating

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Their telephone number……Their age……..

Your name and address

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Your telephone number……

Please note: The nominee must be aware of your nomination and agree to newspaper and radio publicity.

Please state why you feel the person you are nominating deserves an award. Please note: Applications will only be accepted on this form and one other sheet of A4 Paper. Do not send any additional information at this stage. Please note that where multiple applications are received from one organisation, only one application per organisation will be considered.

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