

BRILLIANT PARENTS MOTHER’S DAY AWARD CEREMONY

*Sponsored by Shea Moisture*

**NOMINATION FORM**

**to be completed by Family member / Work Colleague / Friend**

Please complete and sign this form and submit by midnight on15th January 2018

**via email to: enquiries@brilliantparents.org**

***Nominee’s details***

**Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Mother / Grandmother / Foster Mother / Step Mother / Carer – Please circle**

**Position: Employed / Self-employed / Retired / Home-maker – Please circle­­­­­­­­­­­­­­­­­­**

**If employed / self-employed / retired, please state (1) which industry, (2) company name, (3) position held**

Postal address:

Postcode: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Country: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone:

Email:

***Nominating person’s details***

**Relationship to nominee: Family member / Work Colleague / Friend - Please circle­­­­­­­­­­­**

**;**

**Name:**

### Phone:

**Email:**

**Please write up to a maximum of 500 words in each of the boxes below about why you think your nominee meets the criteria**

* Against all Odds: Evidence of how they have raised children against all odds (maximum 500 words)
* Sacrifice: Demonstrates sacrifices they have had to make to raise children (maximum 500 words)
* Going the extra mile: Demonstrates the length they have gone to in raising children over and above what is expected
* Bravery: Demonstrates that despite a difficult situation, they have stayed the course and raised children in a dangerous situation

**Signature:**

**Date:**