

2024

Premier's NAIDOC Award

Nomination form

Eligibility

Nominees must be:

- an Aboriginal South Australian resident
- over the age of 18 years
- nominated by someone else
- someone who has made a significant contribution to the lives of Aboriginal people in South Australia.

Please send your nomination marked 'confidential' by email to NAIDOC@sa.gov.au or by post to:

The Premier's NAIDOC Award
C/- Craig Macauley
Attorney-General's Department
Aboriginal Affairs and Reconciliation
GPO Box 464
ADELAIDE SA 5001

Nominations must be received no later than 5pm, Friday 31 May 2024

If you need to talk about your nomination, please contact
Aboriginal Affairs and Reconciliation on 08 7322 7057 or email NAIDOC@sa.gov.au



Government
of South Australia

Contact details

Nominator's details

Family name:..... Given name:.....
Title: Mr Mrs Miss Ms Dr Other Please specify:.....
Postal Address:.....
Suburb:..... Post Code:.....
Business phone:..... Home/Mobile phone:.....
Email:.....

Nominee's details

Family name:..... Given name:.....
Title: Mr Mrs Miss Ms Dr Other Please specify:.....
Date of Birth (if you know this date):.....
Postal Address:.....
Suburb:..... Post Code:.....
Business phone:..... Home/Mobile phone:.....
Email:.....

Please note:

- All nominations are kept strictly confidential and the information provided will be used only to assist in considering the merits of the nomination.
- Information provided in nominations should be verifiable and referees should be aware that they may be contacted.

Referee details

Please provide the names and contact details of three referees who are in a position to comment on the nominee's service. Note: Referees cannot be direct family members of the person nominated.

Referee 1

Family name:..... Given name:.....

Title: Mr Mrs Miss Ms Dr Other Please specify:.....

Occupation/Position (if applicable):.....

Organisation:..... Relationship to Nominee:.....

Business phone:..... Home/Mobile phone:.....

Email:.....

Referee 2

Family name:..... Given name:.....

Title: Mr Mrs Miss Ms Dr Other Please specify:.....

Occupation/Position (if applicable):.....

Organisation:..... Relationship to Nominee:.....

Business phone:..... Home/Mobile phone:.....

Email:.....

Referee 3

Family name:..... Given name:.....

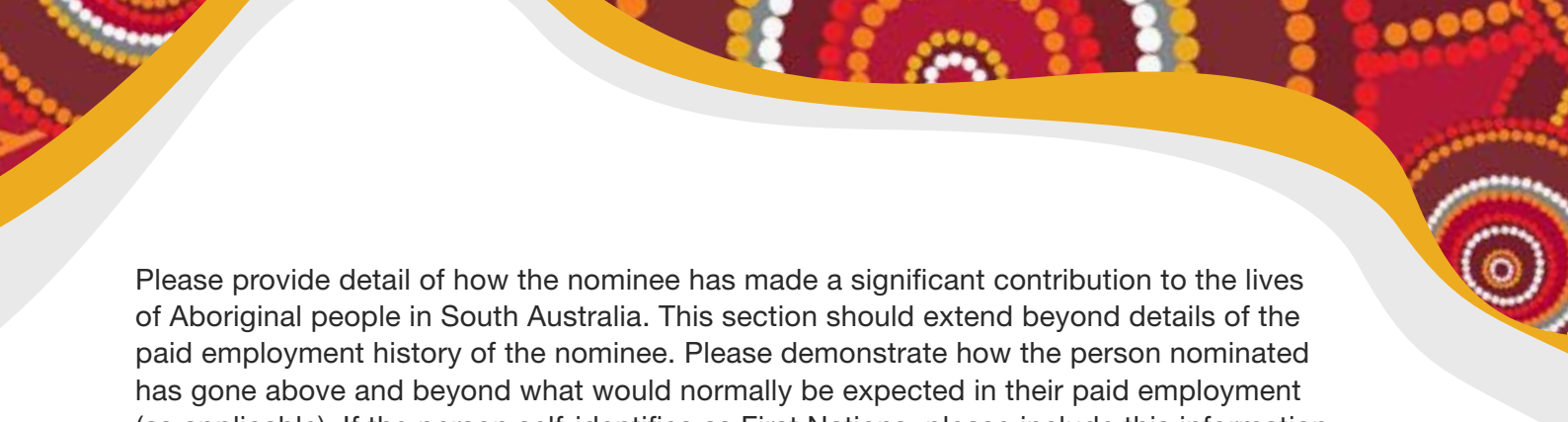
Title: Mr Mrs Miss Ms Dr Other Please specify:.....

Occupation/Position (if applicable):.....

Organisation:..... Relationship to Nominee:.....

Business phone:..... Home/Mobile phone:.....

Email:.....



Please provide detail of how the nominee has made a significant contribution to the lives of Aboriginal people in South Australia. This section should extend beyond details of the paid employment history of the nominee. Please demonstrate how the person nominated has gone above and beyond what would normally be expected in their paid employment (as applicable). If the person self-identifies as First Nations, please include this information. Additional pages may be added if required.

