

Please use this short form to nominate **one** individual or team for **one** award. You can enter yourself/selves, or you can be nominated by a colleague working in the Welsh NHS or partner organisation (e.g. university, cancer charity)

You can nominate yourself or others for as many awards as you like – please just complete a different form each time. Additional guidance is available in the accompanying ‘Guide to Awards’ and on our website.

**Choose the award** (tick one)

|  |  |  |
| --- | --- | --- |
| **Achievement Awards** | **Innovation & Improvement Awards** | **Excellence Awards** |
| Working together  Better patient experience  Patient & public participation & involvement | Innovation & Improvement: Early detection & diagnosis  Innovation & Improvement: Cancer treatment  Innovation & Improvement: Working with industry & 3rd Sector  Innovation & Improvement: Cancer workforce | Excellence: Systems & Pathways  Excellence: Non-medical & Nursing  Excellence: medical |

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Explain why you are nominating the individual/team for this award (600 words max).

* Describe the nominee(s) to us – why do they deserve this award?
* Where possible include specific achievements relevant to the award - what was done, when, where and in what context
* Highlight what positive impact the nominee(s) have had, and for whom (including particular groups where applicable); connect this impact to overall cancer outcomes if possible

Feel free to embed links or further documents that provide supportive evidence to your application.

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**Are you nominating a team or individual?**

Individual  Team

**a. Who is your nominee?** (If this is a team nomination, enter the details of one person on that team. You'll be able to enter the other team members in step b.)

|  |  |  |
| --- | --- | --- |
| Full Name |  | |
| Occupation |  | |
| Organisation |  | |
| Email address |  | |
| If shortlisted, are they able to attend the celebration and awards night on Thursday 13 June? | | Yes / No / Don’t know |

**b. If nominating a team, provide the details of other team members here.** (Copy and reuse the table as many times as required).

|  |  |  |
| --- | --- | --- |
| Full Name |  | |
| Occupation |  | |
| Organisation |  | |
| Email address |  | |
| If shortlisted, are they able to attend the celebration and awards night on Thursday 13 June? | | Yes / No / Don’t know |

|  |  |  |
| --- | --- | --- |
| Full Name |  | |
| Occupation |  | |
| Organisation |  | |
| Email address |  | |
| If shortlisted, are they able to attend the celebration and awards night on Thursday 13 June? | | Yes / No / Don’t know |



Please fill out this section if you are nominating other(s) – i.e., not self-nominating.

|  |  |  |
| --- | --- | --- |
| Full Name |  | |
| Occupation |  | |
| Organisation |  | |
| Email address |  | |
| If shortlisted, are you able to attend the celebration and awards night on Thursday 13 June? | | Yes / No |