##

## NOMINATION FORM for

## the Achievement Event for Nottinghamshire Children Looked After or in Residential Care

|  |  |
| --- | --- |
| Name of Young Person |  |
|  | Date of birth: | Age: | School Year (if applicable): |
| Name of carer |  |
| Address |  |
|  | Tel. no: | Email address: |
| School/Education Provider |  |
| Reason for nomination (please give us plenty of information!) |  |
| Nominator’s name |  |
| Role |  |
| Contact email address |  |

Please return to: Dace Birzgalis-Liegis

E-mail: dace.birzgalis-liegis@nottscc.gov.uk

Tel: 0115 804 0644

**by 5 June 2020 at the latest please**