

SECTION 5. REFEREE DETAILS

REFEREE ONE:	REFEREE TWO:
NAME:	NAME:
PHONE NUMBER:	PHONE NUMBER:
EMAIL:	EMAIL:
CURRENT POSITION:	CURREN POSITION:
LENGTH OF TIME IN POSITION:	LENGTH OF TIME IN POSITION:
RELATION TO APPLICANT:	RELATION TO APPLICANT:
PREFERED TIME OF CONTACT:	PREFERED TIME OF CONTACT:

SECTION 6. NOMINATION SELECTION CRITERIA

Entrants must write a submission. The submission must answer selection criteria A, B and C, and adhere to the submission requirements above. **All sections must be addressed. Attach all supporting evidence to the application form.**

SECTION A - PERSONAL ATTRIBUTES:

In 200 words or less provide clear examples and evidence that support the applicant's personal attributes to presenting in relation to each of the following:

- Presentation skills
- Communication skills
- Attire and appearance
- Positive attitude
- Commitment to AUSTSWIM

SECTION B - PRESENTING EFFECTIVENESS:

In 200 words or less provide clear examples and evidence that supports the applicant's teaching effectiveness including:

- Preparation
- Adherence to:
 - AUSTSWIM Presenter Code of Behaviour
 - AUSTSWIM's principles, philosophies and beliefs
- Safety implementation
- Supervision
- Adaptability
- Use of appropriate feedback to candidates
- Behaviour management
- Candidate feedback indicates a high level of satisfaction with courses provided by the presenter

SECTION C - PROFESSIONAL DEVELOPMENT:

In 200 words or less provide clear examples and evidence that supports the applicant's commitment to professional development above and beyond that required for renewal of the AUSTSWIM Presenter agreement.

SECTION 7. DECLARATION

BY PERSON NOMINATING ENTRANT:

I agree to abide by the conditions of entry listed in this document. I understand that to be eligible to enter all criteria must be addressed and all documents must be submitted together and received by AUSTSWIM New Zealand no later than the due date. I agree that the award review panel's decision is final. I understand that the nominee must be the recipient of the respective regional award to be nominated for the National AUSTSWIM Awards.

SIGNATURE: _____

DATE: _____

Send To: Submit your completed nomination form to AUSTSWIM Aotearoa, PO BOX 619, Kaitaia, 0441 by 10:00am Monday 1 June 2015.

ALL APPLICATION CONTENT AND MATERIAL IS CONFIDENTIAL AND ONLY USED BY AUSTSWIM AND NEW ZEALAND RECREATION ASSOCIATION FOR AWARD PURPOSES.

For further information contact Esther at esther@austswim.co.nz