



**WATER DIRECTORATE  
NSW OPERATOR OF THE YEAR AWARD 2007  
NOMINATION FORM**

EMPLOYER \_\_\_\_\_

CONTACT PERSON \_\_\_\_\_

ADDRESS \_\_\_\_\_

TOWN/CITY \_\_\_\_\_

TELEPHONE \_\_\_\_\_ FAX \_\_\_\_\_

NOMINEE \_\_\_\_\_

PREFERRED NAME \_\_\_\_\_

POSITION \_\_\_\_\_

YEARS OF EMPLOYMENT \_\_\_\_\_

QUALIFICATIONS/TRADE, etc \_\_\_\_\_

- Applicants must complete all sections and performance will be judged on all main criteria.
- Please submit typewritten applications by fax on (02) 9283 5255

**NOMINATIONS MUST BE RECEIVED BY THE  
EXECUTIVE  
OFFICER, WATER DIRECTORATE  
BY FAX (02) 9283 5255  
NO LATER THAN 9<sup>TH</sup> JULY 2007.**



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5. Other Community involvement – (please attach separate sheet if required)

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