



Thera (Scotland) Star Awards 2020 Nomination Form

Your name (please print)	
Address	
Phone number	
Name of the person you are nominating	
Please tick which award you are nominating this person for	<input type="checkbox"/> Inclusion Star <input type="checkbox"/> Positive Star <input type="checkbox"/> Rising Star <input type="checkbox"/> Shining Star
Why should this person be recognised?	
Tell us what they do that makes them shine?	

Please return to Liz Rankin by Monday 15 February
c/o 13 Fall Avenue, Dunbar, East Lothian, EH42 1FY
or email: Liz.Rankin@thera.co.uk



Thera (Scotland) Star Awards 2020 Nomination Form

Nominating on behalf of (person supported)	
Your name (please print)	
I am...	<input type="checkbox"/> A parent or carer <input type="checkbox"/> A staff member
Address	
Phone number	
Email	
Name of the person you are nominating	
Please tick which award you are nominating this person for	<input type="checkbox"/> Inclusion Star <input type="checkbox"/> Positive Star <input type="checkbox"/> Rising Star <input type="checkbox"/> Shining Star
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