

The Insurance Institute of Luton & Hertfordshire Shining Star Award Nomination Form.

www.localinstitutes.cii.co.uk/luton-hertfordshire

Please read the GUIDANCE NOTES FIRST before completing this nomination form:

- This Award is open to any CII/PFS member who has shown exceptional professionalism and talent and has also made a significant impact.
- The individual being nominated will work within the General Insurance or Financial Planning profession and be a CII/PFS member of The Insurance Institute of Luton & Hertfordshire.
- The individual must have demonstrated consistently high levels of professional achievement by proactively developing themselves through completing institute examinations or through any form of professional vocational study and has also either:
 - a) Successfully contributed to a work-based project of benefit to their current employer and/or
 - b) Successfully participated in a community-based project that brings the insurance or financial planning profession into good repute

And

- c) Has made a significant contribution to the success of their team with a performance which considerably exceeds the expectations normally associated with someone of their age and experience.
- Forms preferably should be typed. If handwritten, please use black pen only (and ensure legibility)!
- Complete all sections of the Nomination Form or the Awards Panel may be unable to consider your nominee.
- The Awards Panel relies solely on the information provided within the application process. It is essential to provide as comprehensive a submission as possible by providing relevant information and details both of professional and other achievements.
- This application form may be accompanied by up to two supporting statements each not exceeding 500 words. Such statements may come from an employer, a colleague or general market practitioner. There must be no commercial relationship between the nominee and the party providing the supporting statement.

Data Protection:

- The contact details provided below will be used for the purpose of administering the Nomination.
- All information provided will be shared with the Awards Panel for consideration.
- In signing this form the Nominator agrees to receive email or telephone contact from the Awards' Panel Chair, if circumstances merit clarification or amplification.
- All personal data contained in the Nomination Form will be processed in line with the CII's Data Protection and Privacy Statement available on the website:
 Data Protection and Privacy Statement | Chartered Insurance Institute (CII)

Nominator's Name and PIN:
Telephone:
Email address:
Local Institute Name:
Nominee's Name:
Telephone:
Email address:
Linaii address.
Local Institute Name:
PIN – if known:
PIN – IT KNOWN:
Job title:
Employers Name and Address (if known):
Highest Level of Qualification and Date Passed/Completed:

The Nomination

In this section, space has been provided to set out details of how the nominee has made a significant contribution personally to the following:

- a) Successfully contributed to a work-based project of benefit to their current employer and/or
- Successfully participated in a community-based project that brings the insurance or financial planning profession into good repute CII/PFS/institute locally, regionally and/or nationally and
- c) Has made a significant contribution to the success of their team with a performance which considerably exceeds the expectations normally associated with someone of their age and experience.

It is important that you give as much detail as possible about what your nominee has achieved which makes them stand out against others i.e. the 'wow' factor.

Please note the maximum word limit is 500 words on each question. However, do try and use as much of the word limit as possible.

A: Please provide some career background for this nominee. (Provide as much detail						
as possible – e.g. their reputation; what interaction have they had with our Institute? Please						
provide a brief career background detailing any particular projects/achievements explaining						
what they were about, their approach and what the outcomes were).						
B: To what extent has this person:						
D. 10 Wilat C	Atent has this person.					
	Successfully contributed to a work-based project of benefit to their					
a.	Successfully contributed to a work-based project of benefit to their current employer and/or					
a.	Successfully contributed to a work-based project of benefit to their current employer and/or Successfully participated in a community-based project that brings the					
a. b.	Successfully contributed to a work-based project of benefit to their current employer and/or Successfully participated in a community-based project that brings the insurance or financial planning profession into good repute					
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C: What contribution has this person	on made within their local community (if not known
please state "not known").	
Does their performance consideral with their age and experience? If	nificant contribution to the success of their team? bly exceed the expectations normally associated so how? (Provide as much detail as possible – e.g. eeded expectations, information on what it was about, les were).
E: Please provide below, any additi nomination.	onal information that you feel is applicable to this
Signature:	Dated:

Disease and this form and any supporting statements by midnight on 45 Nevember

Please send this form and any supporting statements by midnight on 15 November 2024 to: rachel.iioflutonandherts@gmail.com. Please be sure to place the words "Shining Star Award Nomination Form" in the email heading.

Date received: