Registration - Individual Category

Nomination Category

I wish to nominate in the following category(s):

- ☐ Customer Service Manager of the year OR CS Leader of the Year (cross out one)
- ☐ Customer Service Professional of the year OR CS Advocate of the Year (cross out one)
- ☐ Customer Service CEO of the year OR CS Contact Manager of the Year (cross out one)

Section A - Applicants details

Name of Applicant .....
Position .....
Company .....
Postal Address .....
.....
Phone (BH) ..... Phone (AH) .....
Fax ..... Email .....

Section B - Referees

Referee 1

Name .....
Position .....
Company .....
Relation to Nominee .....
Postal Address .....
.....
Phone (BH) ..... Fax .....
Email .....

Referee 2

Name .....
Position .....
Company .....
Relation to Nominee .....
Postal Address .....
.....
Phone (BH) ..... Fax .....
Email .....

Referee 3

Name .....
Position .....
Company .....
Relation to Nominee .....
Postal Address .....
.....
Phone (BH) ..... Fax .....
Email .....

Section C - Conditions

I hereby nominate myself/accept to be nominated for the CSIA Australian Service Excellence Awards. I declare that all the information provided is true and accurate and agree to abide by the conditions of entry. Entries close: 30 June 2010.

Registration - Individual Category

Section D - Employer endorsement

This section is to be completed by the applicant's employer
(Not applicable for Customer Service CEO of the year)

Name of employer .....
Position .....
Company .....
I support this nomination (signed) .....

Section E - Nominator endorsement

This section is to be completed by those nominating another person.

Name of nominator .....
Position .....
Company .....
Postal Address .....
.....
Phone (BH) ..... Phone (AH) .....
Fax ..... Email .....

I believe he/she should be nominated because .....
.....
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.....
.....

Please attach submissions and other supporting documentation.

Section F - Nomination Fee

Payment of $60* is payable on all Individual nominations

☐ Enclosed is my cheque. Please make cheques payable to
Customer Service Institute of Australia

Please charge my:

☐ Bankcard ☐ Visa ☐ Mastercard ☐ Diners Club ☐ Amex ID

Credit card number ..... Expiry .....
Amount $ .....
Cardholder's Name (please print) .....
Signature ..... Date .....

* Prices exclusive of GST

Please return to:

CSIA Australian Service Excellence Awards
Suite 203,6a Glen St, Milsons Point NSW 2061
Email: info@csia.com.au Fax: (02) 9956 6449

CSIA
CUSTOMER SERVICE INSTITUTE OF AUSTRALIA