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| ATTA Awards 2017Application Form | C:\Projects\6. Associations\ATTA\Dropbox\ATTA Dropbox\Artwork\Logo\ATTA-Logo-Design.png |
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| **Category of Award Application:** | **Select an Award Category**  |
|  |
| **Personal Information** |
| Full name: |  | Title: |  |
|  |
| Email: |  | Telephone: |  |
|  |
| Business: | The name of the organisation to which you belong or which you represent |
|  |  |
|  |
| Most Transformations and Turnarounds require teamwork. Should any of the main stakeholders in this success story be invited to the ATTA Awards dinner if this application is shortlisted? |
|  | Name | Role (e.g. sponsor, team) | email |
| 1 |  |  |  |
| 2 |  |  |  |
| 3 |  |  |  |

**Undertakings**

By signing this document, you confirm that you have read and agree to the following conditions:

|  |  |
| --- | --- |
| [ ]  | I confirm that the information supplied in this application is true to the best of my understanding. |
| [ ]  | I agree to submit myself to an interview, if so required by the Awards Committee. |
| [ ]  | I agree to attend the Awards Ceremony on 10 November 2017 if shortlisted. |
|  |  |
| Print Full name: | Date: |
|  |   |

Please email this cover sheet with your application to awards@asiatta.com by 20 October 2017.

Notes:

* All the information supplied in this application is confidential and will be disclosed solely to the Awards Committee, ATTA Board and persons appointed by the Awards Committee to assist in interviewing.
* For further information please feel free to contact Guy Facey or James Greener by email at awards@asiatta.com or by telephone on +852 8120 7230.