**Nomination Form for Local Staff Awards 2024/25**

To be submitted to anna.todd2@nhs.scot by 5pm on 12/2/25. Alternatively complete the MS Forms version before noon on 14/2/25

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| --- | --- | --- | --- |
| Highlight the category that you think best fits this nomination.See guidance for more information about the categories. | Team of the Year | Employee of the Year | Leader of the Year |
| Innovation of the Year | Project of the Year | Sustainability Award |
| Customer Service Excellence Award | Rising Star Award | Collaboration Award |
| Health and Safety Award | Staff Wellbeing Initiative of the Year | Domestic Services Excellence Award |
| Portering Services Excellence Award | Catering Services Excellence Award | Decontamination Services Excellence Award |
| Transport Excellence Award | Linen Services Excellence Award | Joiner of the Year Award |
| Plumber of the Year Award | Maintenance Technician of the Year Award | Electrician of the Year Award |
| Administrative Services Excellence Award |  |  |
| Please give a brief description of the individual, team or service.  |  |
| What did they do?  |  |
| What difference did this make for patients, staff or the wider department or organisation? |  |
| If this is about a team or a project, who were all those involved? |  |
| Any additional information – perhaps supporting documents, reports or visual material. |  |
| Name and contact details of line manager of the individual or team nominated |  |
| Contact Details of nominated individual or team lead (to notify result of nomination) |
| Name |  |
| Job Title |  |
| Email address |  |
| Office location |  |
| Contact Number  |  |