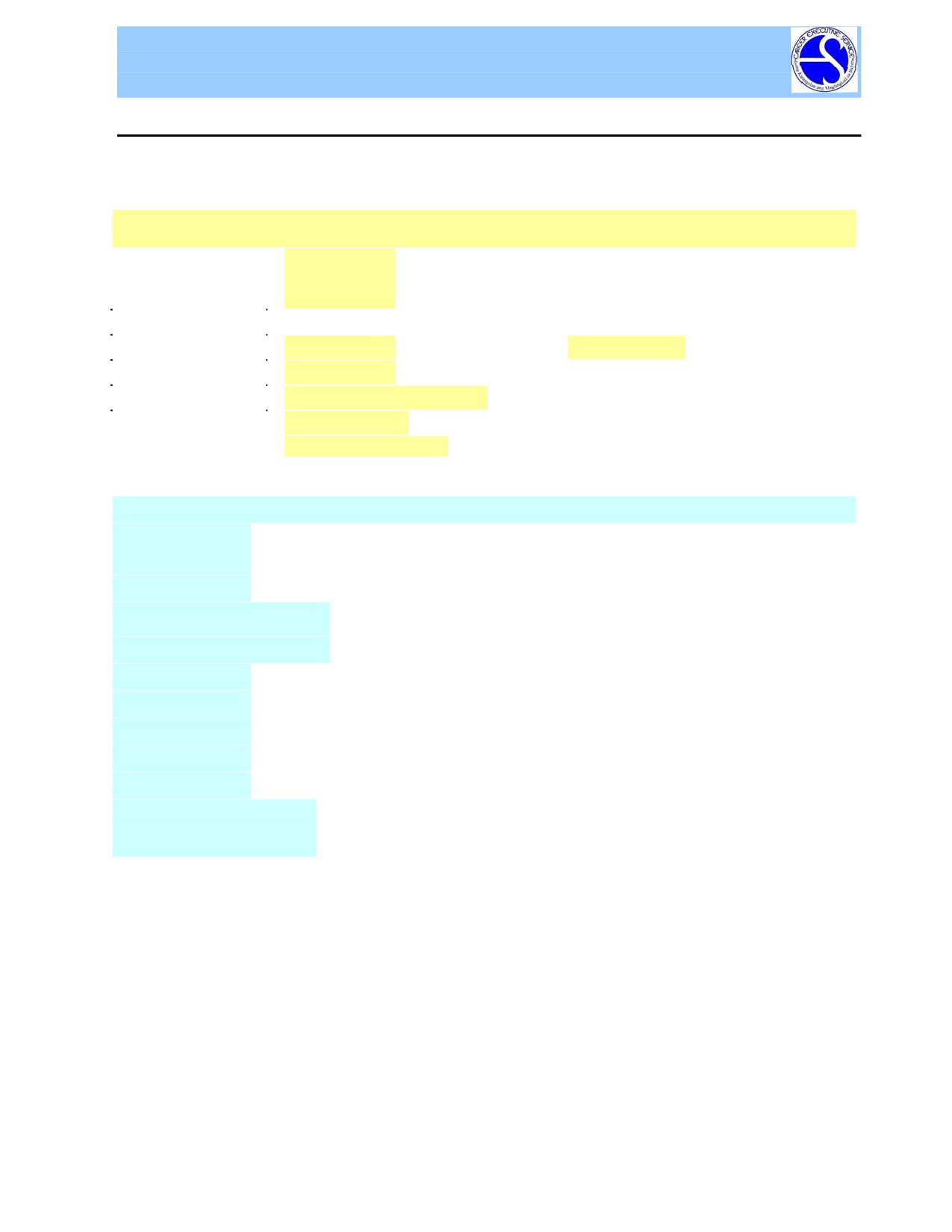
GAWAD CES REVISED NOMINATION FORM



*Instruction : This FORM shall be filled out by the NOMINATOR and submitted to CESB in not more than twenty*

*(20) pages, including attachments.*

PART I: Basic Information

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| NOMINEE’S INFORMATION | | | | | | | | |
| Recently taken  passport size photo  of NOMINEE |  | Name of the  NOMINEE |  | | | | | |
|  | (Last) (First) (Middle) | | | | | |
| Date of Birth: |  | | | | Place of Birth: |  |
| Position: |  | | | | | |
| Department/Agency/Region: | | | |  | | |
| Mailing Address: | |  | | | | |
|  |  | Eligibility/Rank Status: | | |  | | | |

|  |  |  |  |
| --- | --- | --- | --- |
| NOMINATOR’S INFORMATION | | | |
| Name of the  NOMINATOR |  | | |
| Position/Title: |  | | |
| Agency/Organization/Institution  Represented | | |  |
| Relation to the Nominee | | |  |
| Mailing Address: |  | | |
| Phone (Landline): |  | | |
| (Mobile): |  | | |
| (Fax): |  | | |
| Email: |  | | |
| Signature of Nominator/Date: | |  | |

How long and in what capacity have you known the Nominee?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_   
Has the Nominee been nominated in the CES Recognition Program before?\_\_\_\_\_\_\_\_\_\_\_

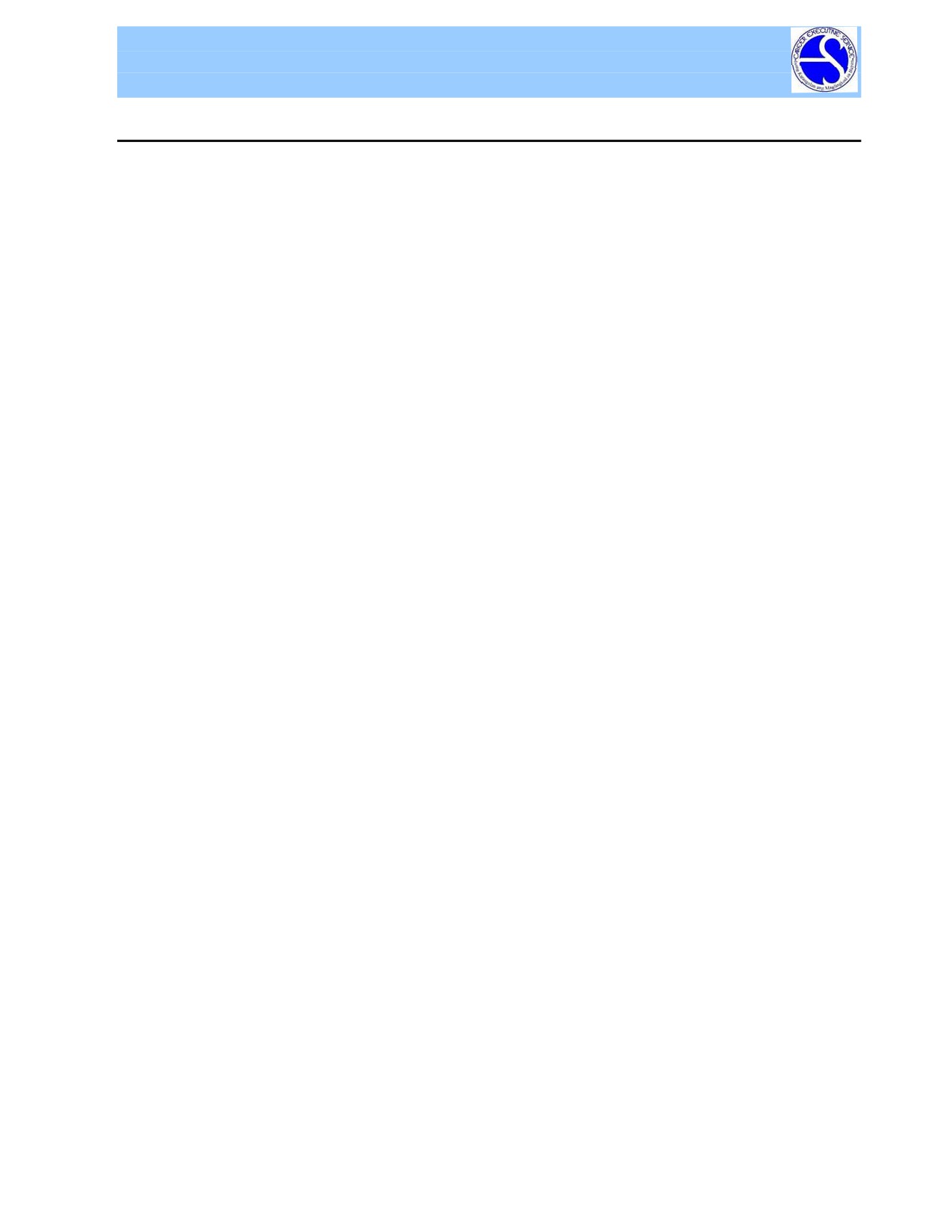
If yes, by whom and when?

In case of re-nomination, is the nominee being cited for the same contributions/ accomplishments?

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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at gawadces@cesboard.gov.ph, or call (632) 951-4981 locals 110, 111, or 126. You may also write us at No. 3 Marcelino Street, Holy Spirit Drive, Diliman,   
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*Instruction : Please provide as complete, concrete and concise answers as possible*

PART II: Abstract of Nominee’s Accomplishment

1. Please list and describe three most outstanding accomplishments/contributions   
 of the NOMINEE in the last five years.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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1.3 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_   
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2. Why would you consider each of the above accomplishments REMARKABLE  
 and WORTHY of recognition in the GAWAD CES?

Accomplishment # 1 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Accomplishment # 2 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Accomplishment # 3\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_   
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3. Describe the IMPACT of each accomplishment. *(What problems/needs each of his/her   
 accomplishment addressed/ solved/minimized? How did it improve the beneficiaries, the   
 sector served, delivery of services; what was their condition before the NOMINEE’s   
 intervention? How did it result to higher level of organizational performance/productivity   
 /efficiency/effectiveness? How did it enhance policy-making and governance? How much   
 savings/income generated?)*

Accomplishment # 1 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Accomplishment # 2 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Accomplishment # 3 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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4. What was the distinct/critical ROLE performed by the NOMINEE in carrying out each

accomplishment? *(How would the outcome be different without the NOMINEE’s participation?)*

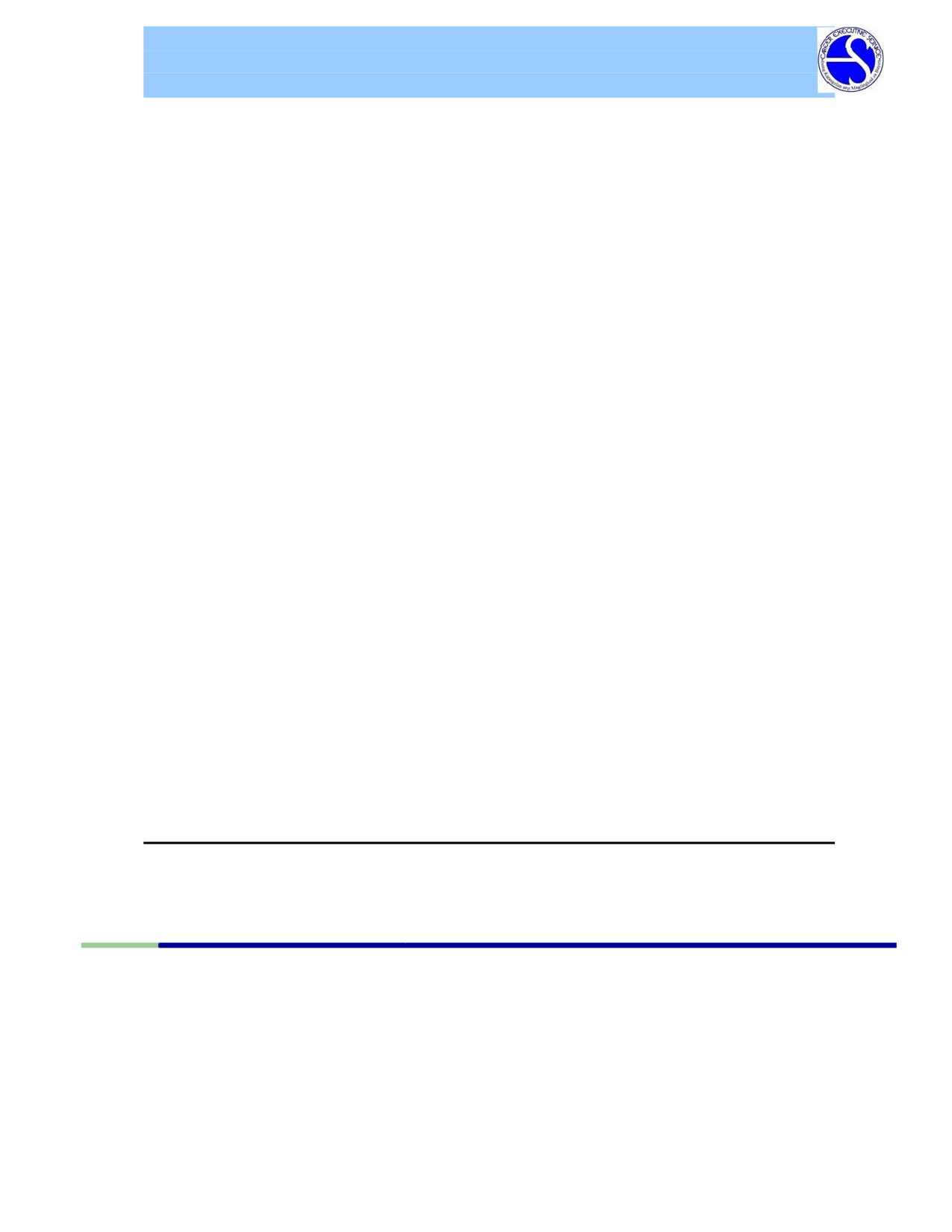
Accomplishment # 1\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_   
Accomplishment # 2\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_   
Accomplishment # 3\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

5. Would you consider the NOMINEE’s accomplishments sustainable? How/Why?

Accomplishment # 1\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_   
Accomplishment # 2\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_   
Accomplishment # 3\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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PART III: Description of the Nominee’s Personal Attributes

1. What other awards, recognition and citations received by the NOMINEE in the   
 department, community, region? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

2. How would you describe the traits of the NOMINEE:

As a LEADER \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

As a MEMBER of the community of CESOs/Eligibles \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

As a FAMILY MEMBER *(if information is available) \_*\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

3. How has the NOMINEE been described or is regarded by his/her peers in the

region/department, by subordinates, LGU officials, private sector, NGOs, etc?

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_   
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4. How would you describe the NOMINEE’s integrity?

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_   
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5. Other information that demonstrate NOMINEE’s ability in leading people, driving   
 results, optimizing resources, building coalitions/linkages.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_   
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PART IV: LIST OF REFERENCES

*Instruction: Please list TWO REFERENCES who are very familiar with the NOMINEE’s accomplishments/contribution and personal attributes. Include their Name, Position, Affiliation/Organization, Address, Telephone, Fax, Mobile Numbers, and Email address.*

I attest to the COMPLETENESS, TRUTHFULNESS and ACCURACY of all facts and claims stated herein.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

NOMINATOR

Signature and Printed Name/Date

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