



FOR OFFICE USE ONLY

Nomination No:

Reference:

Receipt Date:

INDIVIDUAL NOMINATION - PART 2

This form provides further information on a nomination to assist the Butler Trust Awarding Panel in their deliberations. The Butler Trust local Co-ordinator should ensure that this form is completed in full on all nominations forwarded to them.

Please type this form (**min. font size 10pt**) or write in black ink (making sure the handwriting is legible). The completed form should then be sent by post, with the original nomination (Part 1) attached, to: The Butler Trust, Howard House, The Arcade, 32-34 High St, Croydon CR0 1YB.

For inclusion in the current annual nomination cycle, both Parts 1 and 2 of the nomination should reach us by **31 May** at the latest. Please do NOT add any other attachments – as we will be unable to forward them to the Awarding Panel.

[This form is for individual nominations only. For joint nominations please use the joint form.]

NOMINEE

DETAILS OF PERSON BEING NOMINATED

First name, surname & title:

Workplace
(eg establishment, probation area):

Rank and/or Job Title:

When did they start doing the work for which they are being nominated?

Month: Year:

NOMINATOR

DETAILS OF PERSON MAKING THE INITIAL NOMINATION

First name, surname & title:

Position:

NOMINEE CONSENT FORM

[To be completed by the person being nominated]

I have read the Butler Trust nomination made by:

- Awards and Commendations are presented at our Annual Award Ceremony by our Patron, HRH The Princess Royal
- People short-listed for an Award are interviewed by our Awarding Panel (but that's not as scary as it sounds!)
- The Butler Trust offers support to Award Winners and Commendees to develop and disseminate their work across the correctional services (though this is optional)

I am happy for my nomination to be submitted to The Butler Trust.

I have been given a copy of the nominee "Equality and Diversity Monitoring Form".

Your name:

Signature:

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Date:

Have you received either an Award or Commendation from the Butler Trust before – either individually or as part of a group? If so, please give brief details (including the year) below:

COMMENTS BY LOCAL CO-ORDINATOR

[To be completed by the local Butler Trust Nominations Co-ordinator]

Name of nominee:

The Trust's Awarding Panel rely heavily on the quality of the paperwork provided and the strength of the case made in support of the nomination so you may wish to build on and/or provide additional evidence to back up the case made in the original nomination. Below, please comment on the nomination – indicating the level of support for it locally and giving any additional information which you think will help the panel assess this nomination.

NB: Do NOT add any attachments to this nomination or exceed the space available.
And please ensure ALL nominations are forwarded to the Trust where the nominee consents.

Please indicate what your comments are based on:

Personal knowledge

Consultation with colleagues

Consultation with offenders

COMMENTS BY LOCAL CO-ORDINATOR continued

COMMENTS BY LOCAL CO-ORDINATOR continued

LOCAL CO-ORDINATOR'S DETAILS

Your name:

Job title:

Workplace
(eg establishment, probation area):

Email address:

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Date:

Please tick if you would like an email acknowledging receipt of this nomination

SIGN OFF

[To be completed by the Prison Governor, Probation Chief etc (see next page for details)]

Name of nominee:

Please give brief details below of the level of management support for the nomination and the reasons for it (please note: we need this to help the Awarding Panel make their judgement about the merits of the nomination):

Should the nominee be called for interview for a possible Butler Trust Award I am happy to cover any T&S associated with their attendance

Should the nominee be given an Award or Commendation I am happy to cover any T&S for their attendance at the Award Ceremony and briefing meeting beforehand

Award Winners and Commendees will be offered a place on an accredited course in “developing and disseminating good practice”, involving two days training and two short pieces of written work. *I am happy to support their engagement in this (inc. covering T&S)*

Your name:

Job title:

Email address:

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Date:

NOTES

Who should sign off the nomination?

Setting in which nominee/s work/s:	Sign off by:
Custodial settings	
Prison, Young Offender Institution / Centre	Governor / Director
Secure Training Centre / Juvenile Justice Centre	Governor / Director
Secure Children's Home	Centre Manager / Director
Probation / Criminal Justice Social Work	
Probation – England & Wales	Chief Exec of Probation Trust
Criminal Justice Social Work – Scotland	Local Director of Social Work
Probation – Northern Ireland	Chief Exec of PBNI
Youth Justice (community)	
YOT – England & Wales	YOT Manager / Director
Youth Justice – Scotland	Local Director of Social Work
Youth Justice Agency – Northern Ireland	Chief Exec of YJA
Headquarters	
NOMS (inc PSC) – England & Wales	Relevant HQ Director
Youth Justice – England & Wales	(National) Director of Youth Justice
SPS – Scotland	Chief Exec of SPS
NIPS – Northern Ireland	Director General of NIPS
Probation Board – Northern Ireland	Chief Exec of PBNI
Youth Justice Agency – Northern Ireland	Chief Exec of YJA

Please note: people may not “sign off” their own nominations, if the person who would normally complete the “sign off” is themselves being nominated, their nomination should be signed off by their line manager.

Checklist

- The original nomination (Part 1) has been attached to the front of this form
- The nominee and nominator information sections of this form (Part 2) have been completed
- The nominee has read Part 1 of the nomination and signed the consent section in Part 2
- The local co-ordinator sections of Part 2 have been completed and signed in full
- The counter-signing officer has read both Part 1 and Part 2 of the nomination
- The counter-signing officer has completed and signed the Sign Off section in Part 2

The completed form should be sent to us by post, with Part 1 attached, to:
The Butler Trust, Howard House, The Arcade, 32-34 High St, Croydon CR0 1YB.

NB: We can not accept nominations which have not been completed in full. For inclusion in the current annual nomination cycle, they should reach us by **31 May** at the latest.