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| **2020 Premier’s Science Awards**  **Endorsement Form – Research** | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | |
| Name of applicant | | | |  | | | | | | | | | |
|  | | | | | | | | | | | | | |
| Category | | | |  | | | | | | | | | |
|  | | | | | | | | | | | | | |
| This form must be completed and signed by the individual providing endorsement for the application. The endorser confirms that the application is true and correct and that it is supported by the applicant’s management. An individual can endorse multiple applicants for the same category.  For applicants in the Scientist of the Year and Woodside Early Career Scientist of the Year categories, the application must be endorsed by a supervisor or manager within the applicant’s organisation, such as the CEO, Head of Research Group or similar.  For applicants in the ExxonMobil Student Scientist of the Year category, the application must be endorsed by a supervisor or manager directly supervising the student’s work. Student applicants are also required to provide a statement from their supervisor in the *Evaluation Criteria Form* outlining the extent to which the applicant leads research activities and/or leads with guidance.  **Please ensure a scanned copy of the completed signed form is submitted with the application.** | | | | | | | | | | | | | |
|  |  | I endorse the application. | | | | | | | | | | | |
| Title | | |  | | | | | | |  | | | |
|  | | | | | | | | | | | | | |
| First name | | |  | | | | | Surname | |  | | | |
|  | | | | | | | | | | | | | |
| Position | | |  | | | | | | | | | | |
|  | | | | | | | | | | | | | |
| Organisation | | |  | | | | | | | | | | |
|  | | | | | | | | | | | | | |
| **Relationship to the applicant (e.g. Head of Research Group, supervisor, manager)** | | | | | |  | | | | | | | |
|  | | | | | | | | | | | | | |
| Address | | |  | | | | | | | | | | |
|  | | | | | | | | | | | | | |
| Telephone | | |  | | Mobile | |  | | | | |  |  |
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| Email | | |  | | | | | | | | | | |
|  | | | | | | | | | | | | | |
| Signature | | |  | | | | | | Date | |  | | |

**END OF FORM**