ANNEX 1

# NOMINATION FORM

Particularly Sensitive Sea Areas regional workshop

***Location - Nadi, Fiji***

**week of 27 - 31 July 2015**

**Nomination # 1**

|  |  |  |
| --- | --- | --- |
| **Attendee Name (as per Passport)** | **First Name:** | **Last Name:** |
| **Title (Captain/Dr/ Mr/Mrs/Miss/Ms/Other)** |  | |
| **Position** |  | |
| **Address** |  | |
| **City** |  | |
| **Post Code/Zip** |  | |
| **Country** |  | |
| **Phone** |  | |
| **FAX** |  | |
| **Mobile phone** |  | |
| **E-Mail** |  | |

**Position of Nominating Official......................................**

**Name.....................................................................**

**Signature.................................................................**

**Official seal or stamp of nominating Department or Agency:**

**Notes:** Please return the completed form by email **no later than 8th May 2015:**

Mr. Scott Willson

Marine Pollution Officer

SPREP

Email: [scottw@sprep.org](mailto:anthonyt@sprep.org)

Please also provide a copy of this information to:

Ms. Pulemalie Habiri

Division Assistant – Waste Management & Pollution Control Division

SPREP

Email: [pulemalieh@sprep.org](mailto:pulemalieh@sprep.org)