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

Please also provide a copy of this information to:

 Ms. Pulemalie Habiri

 Division Assistant – Waste Management & Pollution Control Division

 SPREP

 Email: pulemalieh@sprep.org