**ANNEX 1**

# **NOMINATION FORM**

**Regional meeting for the preparation of the GEF ISLANDS Programme**

**9 December 2019**

|  |  |  |
| --- | --- | --- |
| **Attendee Name** | **First Name:**  | **Last Name:**  |
| **Title (Mr/Mrs/Miss/Ms/ Other)** |  |
| **Position** |  |
| **Address** |  |
| **Phone** |  |
| **FAX** |  |
| **Mobile phone** |  |
| **E-Mail**  |  |

|  |  |  |
| --- | --- | --- |
| **Attendee Name** | **First Name:**  | **Last Name:**  |
| **Title (Mr/Mrs/Miss/Ms/ Other)** |  |
| **Position** |  |
| **Address** |  |
| **Phone** |  |
| **FAX** |  |
| **Mobile phone** |  |
| **E-Mail**  |  |

**Signature, Name and Position of Nominating Official:**

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

**Notes:** Please return the completed form by email **not later than Friday 8th November 2019**:

Davina Tiitii

WMPC Programme Assistant

SPREP

davinat@sprep.org

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