



NOMINATION FORM FOR THE 2019 LEILA ST JOHN AWARD

for services to children's literature in Victoria

FULL NAME OF NOMINEE: _____

ADDRESS: _____

CONTACT NUMBERS: M: _____ BH: _____

NAME OF NOMINATOR: _____

ADDRESS: _____

CONTACT NUMBERS: M: _____ BH: _____

NOMINATION

As a financial member *or* life member of The Children's Book Council of Australia (Victorian Branch) Inc., I hereby nominate

_____ for the 2019 Leila St John Award.

Signed _____ Date _____ M/ship No. _____

Please **attach up to 500 words**, setting out the reasons for this nomination.

Please consult **2020 ADVICE TO NOMINATORS**, available from CBCA Vic's website.

Closing date is 28th February, 2020.

Nominations may be sent to CBCA Vic. Branch via email **vic@cbca.org.au** or posted to P.O. Box 781, Kew, Vic. 3101

**THE CHILDREN'S BOOK COUNCIL OF AUSTRALIA
(VICTORIAN BRANCH) INC.**

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T: 1300 360 436; F: 1300 727 990; E: vic@cbca.org.au;
ABN 49 659 828 173; REGISTERED ASSOCIATION A0014226Y

