



CITY OF WINDHOEK
City Police
Human Resource Division

MONTH / YEAR

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EMPLOYEE OF THE MONTH NOMINATION FORM

1. Please fill out this nomination form completely and legibly.	Service number:
2. Submit copy of this form to on or before of each month	Employee number:

I, _____, is honoured to nominate _____
(name of nominator) (name of nominee)

for the employee of the month for the Windhoek City Police Service outstanding Police Officer. This nomination is in recognition of his/her achievements and contributions to the attainment of the Mission and Vision of the Windhoek City Police Service.

Signature of Nominator Rank Name of Unit

PERSONAL INFORMATION OF NOMINEE

Full Name: _____
(Surname & First names)

Current Rank:	Previous Rank:	Category: tick appropriate box <input type="checkbox"/> Commissioned Officer <input type="checkbox"/> Non Commissioned Officer	
No. of Years in active duty:	Gender: <input type="checkbox"/> M <input type="checkbox"/> F		Field of Specialization: tick appropriate box <input type="checkbox"/> Traffic law enforcement <input type="checkbox"/> Crime prevention <input type="checkbox"/> By-Laws
Date of Birth: MM DD YYYY	Place of Birth:	Age:	

FOR THE NOMINATOR:

Please discuss in brief, what makes the nominee deserving of the distinction of an employee of the month for the Windhoek City Police service?

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Signature: