# Outstanding HLTA of the Year 2019: Endorsement Form (Form B)

A colleague has been proposed for the above award. Endorsement of this proposal is required for your colleague to be considered. We would therefore be grateful if you could complete the information below to endorse the information provided in the **Proposal Form (Form A)**.

Please provide all of the following information and send to assessments@bestpracticenet.co.uk

## About the HLTA

|  |  |
| --- | --- |
| Name of HLTA being nominated: |  |
| Region (West Midlands, South West or East) |  |

## About you

|  |  |
| --- | --- |
| Your name |  |
| Position\*: |  |
| Capacity in which you know the nominee: |  |

\*Endorsements must be completed by a different person to the proposer. The endorser must be a senior member of staff

## Supporting statement - max 400 words

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