

# Form I: 2016 Team Nomination

Please complete and return to CTPM no later than: Friday, 10 June 2016

Email: [nelson.rodriques@ctpm.org.au](mailto:nelson.rodriques@ctpm.org.au)

## Submission Category

- ☐ Cross-functional Team Competition Entry  
☐ Area Based Team Competition Entry

## Team Information

Team Name: \_\_\_\_\_

Focus of Improvement Team: \_\_\_\_\_

No. of Team Members: \_\_\_\_\_

Team Facilitator: \_\_\_\_\_

Avg Meeting Time: \_\_\_\_\_ Frequency of Meetings: \_\_\_\_\_ Life of Team: \_\_\_\_\_

## Key Contact Information

Improvement Co-ordinator: \_\_\_\_\_

Mobile: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Key Team Contact:  
if not as above: \_\_\_\_\_

Mobile: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

## Company Background Information

Company Name: \_\_\_\_\_

Site Location: \_\_\_\_\_

Total No. Personnel on site: \_\_\_\_\_