**ABOUT THIS AWARD CATEGORY:**

This award is for an outstanding VR team and the nomination will focus on how they facilitate effective and professional VR, together.

The nomination should, therefore, clearly demonstrate how the team works together and in collaboration with others in order to provide/design/deliver VR that is professional, effective and evidence based.

For example, what is it about the team approach they adopt that makes them more effective than a group of individuals? You might want to refer to team models (e.g., multi-disciplinary; inter-disciplinary; trans-disciplinary etc) to explain the approach taken and why this is the best for the context of practice. Outcomes should be justified and, as far as possible, measurable.

The team can nominate themselves or be nominated by someone outside their team.

The nomination can be supported by testimonials (see the guidance document re use of appendices for testimonials and further information about the nominations).

The Nomination: should be **no more than 1,000 words** and include:

* An introduction of the team members and the rationale for the team approach employed in this particular case/context (approx. 200 words)
* A clear outline of the team makeup and how it works, including how the members contribute to the effectiveness of the team (approx. 600 words).
* What makes this team worthy of an award: how do they stand out as exceptional? (approx. 200 words)

|  |  |
| --- | --- |
| **Nominee:** | |
| Team Name: |  |
| People/organisations involved: |  |
| Team Contact: |  |
| Address: |  |
| Telephone: |  |
| Email address: |  |
| Website: |  |
| Social media: | ***To enhance promotion of the awards please give details for Twitter and LinkedIn*** |
| **Nominator:** | |
| Name: |  |
| GDPR | ***Please anonymise your nomination wherever possible and confirm that any individuals or organisations named within this nomination (including the appendices) has given consent for their details to be shared.***  ***Yes/No*** |
| Nominee consent | ***Please confirm that the individuals/organisations involved in this nomination are fully aware of, and have consented to, the nomination****.*  ***Yes/No*** |
| VRA membership | ***The organisation or at least one of the members of the nominated team must be a member Please list here all the VRA members involved in the project***: |
| ***If the nominator is not part of the team – please complete the following nominator contact details*** | |
| Role: |  |
| Organisation: |  |
| Address: |  |
| Telephone: |  |
| Email address: |  |
| Website: |  |

|  |
| --- |
| **Nomination:** |
| **IMPORTANT:**  ** The organisation or at least one of the members of the nominated team must be a member**  ** All sections to be completed**  ** Only one nomination on each form please (correct form for category)**  ** Please read the Awards Guidance document for more detailed information**  ** We strongly advise that you also read the Judging sheet for this category of award so that you can see how your nomination will be scored** |
| *Insert nomination here. Type in box to expand.* |

**Any appendices should be incorporated into this document on additional pages (see Guidelines for detail)**

**Please submit to** [**enquiries@vrassociation.org.uk**](mailto:enquiries@vrassociation.org.uk) **in line with the awards timetable.**