**Enclosure to your application for participation in the**

**SI Innovation Leaders**

**NOMINATION FORM** (Instructions)

*Examples of who can be your reference person*

* Employer/head/director from your organisation
* If you are director yourself, kindly choose somebody else within your organisation

*Examples of who* ***cannot*** *be referred to and used as reference person*

* Family members/relatives
* Partners
* Friends
* Individuals who demand compensation (money, goods, favors, services or other means) from you in order to give you a statement of reference

*Why do we require a reference person?*

The referee is expected to state an opinion of the applicant from a professional perspective and thereby provide an important supplement to the letter of motivation and the curriculum vitae.

During the selection process, the reference person may be contacted by the Swedish Institute for additional information.

*Restrictions*

The nomination form must be completed in English and cannot exceed two pages. Any additional pages will be disregarded. In order to be valid, the letter must be dated and signed.

The letter should preferably be completed by using the template provided by the Swedish Institute. If, however the referee chooses to write a freeform letter of reference, the details of the applicant as well as contact details for the referee must be provided. Furthermore, the referee is encouraged to answer the questions given in the form.

The completed letter of reference is then to be scanned to PDF format (please **do not** include this instructions page in the conversion) and enclosed along with your application. A letter that is not signed will be disregarded.

*Background:* Information regarding the SI Innovation Leaders (website)

**THE NOMINATION FORM**

The nomination form must be completed in English. The referee may decide on how to allocate text between the questions provided, given that the letter does not exceed two pages. Any additional page will be disregarded. The completed letter must be signed and converted into PDF format.

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| --- | --- |
| FIRST NAME of applicant /as written in the application form/ |  |
| LAST NAME of applicant /as written in the application form/ |  |
| DATE OF BIRTH of applicant /YYYY-MM-DD/ |  |
| CITIZENSHIP of applicant |  |

|  |  |
| --- | --- |
| FULL NAME of reference person |  |
| TITLE/POSITION of reference person |  |
| ORGANISATION of reference person |  |
| E-MAIL ADDRESS of reference person |  |
| TELEPHONE NUMBER of reference person |  |

|  |  |
| --- | --- |
| Please state in what capacity you know the applicant |  |

Kindly answer below questions with max 1000 characters total.

|  |
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| 1. In your opinion, how would participation in SIIL 2019 be valuable for the professional development of the applicant? |
| 2. Please evaluate the applicant’s possibilities (e.g. position and mandate) to influence and develop processes and work carried out within your organisation? |
| 3. Explain how the applicant’s participation in SIIL 2019 could have an impact on your organisation, your community and/or the regional innovation ecosystem? |
| 4. Additional remarks/comments (optional) |

Date and place

Signature of reference person