**FORM 1A**

**NOMINATION for PAM KINGTON LOO MEDAL**

*(This form is to be completed by the Nominators)*

To the PAM Kington Loo Medal Convenor,

We, the undersigned Proposer and Seconder, hereby nominates \_\_ for the PAM Kington Loo Medal \*YEAR\*.

We confirm that we have read and understood all the Rules for the nomination of the PAM Kington Loo Medal and we also confirm that all the information on this Nomination Form are to the best of our knowledge, true and factual, and that we have not willfully suppressed any material fact/s.

PROPOSER

\_\_\_\_\_\_\_\_\_\_\_

Proposer Signature: Date:

Name of Proposer

PAM Membership No ,

of

Name of Firm:

Address:

Tel : Email :

SECONDER

\_\_\_\_\_\_\_\_\_\_\_

Seconder Signature: Date:

Name of Seconder

PAM Membership No ,

of

Name of Firm:

Address:

Tel : Email :

**FORM 1A**

**NOMINATION for PAM KINGTON LOO MEDAL**

*(This form is to be completed by the Nominators)*

Nominee Name: PAM Membership No: \_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_

\_\_\_\_\_\_

Tel: (O) (M) Email:

**Education**

|  |  |  |
| --- | --- | --- |
| **No** | **Institution / Qualification** | **year** |
| 1. |  |  |
| 2. |  |  |
| 3. |  |  |
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**Practice / Career History**

|  |  |  |
| --- | --- | --- |
| **No** | **Career** | **year** |
| 1. |  |  |
| 2. |  |  |
| 3. |  |  |
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**Professional Affiliations**

|  |  |  |
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| **No** | **Professional Bodies / Organisations** | **year** |
| 1. |  |  |
| 2. |  |  |
| 3. |  |  |
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**Social Contributions + Relevant External Affiliations** (if any)

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| --- | --- | --- |
| **No** | **Description** | **year** |
| 1. |  |  |
| 2. |  |  |
| 3. |  |  |
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**Contributions to architecture profession and PAM**

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| --- | --- | --- |
| **No** | **Description** | **year** |
| 1. |  |  |
| 2. |  |  |
| 3. |  |  |
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**Contributions to architectural education**

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| **No** | **Description** | **year** |
| 1. |  |  |
| 2. |  |  |
| 3. |  |  |
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**List of awards for architecture and architecture related activities**

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| **No** | **Description** | **year** |
| 1. |  |  |
| 2. |  |  |
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**Significant contributions**

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| **No** | **Projects** | **year** |
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| 2. |  |  |
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Attachments for this Nomination:

**List of Supporting Documents**

|  |  |
| --- | --- |
| **No** | **Documents** |
| 1. |  |
| 2. |  |
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**List of Supporting Members Testimonials**

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| **No** | **Member Names** |
| 1. |  |
| 2. |  |
| 3. |  |
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*Please describe in the following sections the reasons for this nomination according to the following criterias’ for the PAM Kington Loo Medal.*

1. **Service to the Profession & Society**

Advocate for architecture that benefits society through service to the profession. This includes participation with collateral organisations, community boards engaged in construction, urban planning, environmental, governmental, etc., and/or support of non-traditional roles as a platform for architecture and its benefit to society.

1. **Advancing Education and Knowledge**

Engage in promoting and supporting learning opportunities for those seeking education in their professional careers, from teaching to advancing the knowledge and practice of architecture through research and scholarship.

1. **Leadership/Mentorship**

Exhibit strong leadership advocating for professional growth and development of the architectural profession, including initiating and affecting policy and practice reform. Encourage diversity within the profession, uphold leadership principles, challenge existing standards and advocate for a rich environment. Where the nominee has attained a respected professional standing in society, and that he may be considered an ‘ambassador’ for the profession.

The Nomination of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ for the PAM Kington Loo Medal.

*(a description of the nominee’s merits, major achievements and contributions)*

*max 800 words*

**FORM 1B**

**ACCEPTANCE of NOMINATION**

**for PAM KINGTON LOO MEDAL**

*(This form is to be completed by the Nominee)*

I, \_\_\_\_\_\_\_\_\_\_\_\_\_, hereby duly accept and give consent to this nomination by the Proposer and Seconder for the PAM Gold Medal.

\_\_\_\_\_\_\_\_\_\_\_

Signature: Date:

Name of Nominee

PAM Membership No ,

of

Name of Firm:

Address:

Tel : Email :