

COMMERCIAL/ RESIDENTIAL SUPERVISOR OF THE YEAR AWARD ENTRY FORM

Recognises the quality of the supervision on project nominated for the 2017 Master Builders-Bankwest Building Excellence Awards for the Great Southern Region. The emphasis will be based on the on-site inspection of a team of judges, therefore, the job should demonstrate squareness of setout, plumbness of walls, attention to detail and cleanliness and finish of the job in general. In addition, the following information must accompany this nomination.

CRITERIA

Applicants will be assessed on their overall standard of achievement, taking all the criteria into consideration.

Project management

1. Documentation management.
2. Time performance.
3. Subcontractor coordination.
4. Oversight of apprentices and other staff.

Site management

5. Safety.
6. Quality assurance.
7. Maintenance & repairs.
8. Site organisation.

Skills & experience

9. Project supervisor.
10. Beyond that of their own trade.
11. Communication skills.
12. Complaints handling.
13. Management of workplace culture.
14. Attention to detail
15. Problem solving ability.

ENTRY REQUIREMENTS

In addition to completing this page, please ensure you have included a copy of the following items for each entry. (Items are to be attached together but not stapled or bound).

- Fully completed entry form for each supervisor (including payment).
- A brief description of your company.
- A detailed job description of the nominated supervisor that addresses the judging criteria.
- A brief resume of the supervisor's previous experience.
- Supporting documentation ie feedback forms, client references etc.
- Two (2) photos on CD of the apprentice - one head shot and one on-site (resolution 300dpi, 210mm x 297mm in .jpeg format)

Please return forms to:

Master Builders - Great Southern
PO Box 1518 Albany, WA 6332

T: 9841 6232 F: 9841 6522 E: linda@mbawa.com

ENTRIES CLOSE 5PM, FRIDAY 16 JUNE 2017

Late entries will incur a late fee of \$50.00 per day, per entry

COMPANY DETAILS

Company Name: _____
 Postal Address: _____
 Suburb: _____ P/Code: _____
 Contact Name: _____ Phone: _____
 Mobile: _____ Fax: _____
 Corporate Email: _____
 Number of Employees: _____
 Number of Apprentices & Trainees: _____

AWARD ACCEPTANCE

If successful, the Award will be accepted at the Presentation Dinner by:

Full Name: _____
 Position: _____
 Company: _____

SUPERVISOR AWARD DETAILS

Residential Commercial

Name: _____
 Project Title: _____
 Project Address: _____
 Suburb: _____ P/Code: _____
 Phone: _____ Fax: _____
 Corporate Email: _____

PAYMENT DETAILS (inc. GST)

This document will be a TAX INVOICE upon payment – please forward to your ACCOUNTS department- ABN 83 590 927 922

	No. Members	Subtotal	No. Non-Members	Subtotal
Supervisor Award Entry	1	N/A	1	\$50

Total amount payable: \$ _____ \$ _____

Payment method: Cheque (made payable to Master Builders) Cash

EFT - BSB: 306-051 Acc: 0398745 Ref: **BEA [your company name]**

Credit Card Mastercard Visa

Card Number _____ Expiry Date _____

Cardholder's Name _____ Sign. _____