

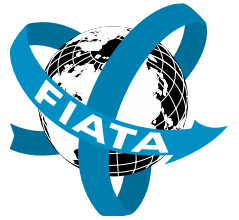


# Young Logistics Professionals Award 2025



Sponsored by the TT Club and FIATA

## Annex 2: FIATA Association Members Nomination of Candidate



The aim of the present form is for FIATA Association Members to nominate their candidate to the Young Logistics Professionals Award 2025 (YLP) Award. Please fill in the form below and once completed, return it by email to the Award Administrator at [yiffa.admin@thomasmiller.com](mailto:yiffa.admin@thomasmiller.com) by 1 February 2025.

### PART I – Association Member information

Name of the Association	
Email address of the Association	
Phone number of the Association	
Name of the person filling the form on behalf of the Association	
Position of the person filling the form within the Association	

### Part II – Candidate information

Title	<input type="checkbox"/> Mr <input type="checkbox"/> Ms <input type="checkbox"/> Mx
Family name	
First name(s)	
Date of birth (DD/MM/YYYY)	
Nationality	
Private address	
Email address	
Phone number	

**For identification purposes, a copy of a document which includes full details on the candidate with a picture is required (passport, national identification).**



### Part III – Selection by FIATA Association Member

Please indicate the candidate’s academic and professional achievements on the basis of which the candidate was selected to represent your Association.

Please describe how the candidate was selected to represent your Association (e.g., internal competition).

By ticking this box, you understand and agree that the information and contact details you provide in this form will be collected and stored by FIATA and TT Club for purposes related to the YLP Award. You also understand and agree that such information, including your contact details can be deleted upon your request. You also confirm that you have informed the candidate of the conditions of the use, storage, and possible of deletion of their personal data, and that they have expressly given their written consent.

.....  
Name and Signature of the Representative  
of the Association Member

.....  
Date

.....  
Stamp