

## SOLOMON PORTS 69TH ANNIVERSARY SPEECH COMPETITION

---

### NOMINATION FORM

**SCHOOL NAME :** \_\_\_\_\_

**JUNIOR CATEGORY NOMINEE:** \_\_\_\_\_ **FORM/CLASS:** \_\_\_\_\_

**SENIOR CATEGORY NOMINEE:** \_\_\_\_\_ **FORM/CLASS:** \_\_\_\_\_

**TEACHER /NOMINATOR NAME :** \_\_\_\_\_

**TEACHER /NOMINATOR SIGNATURE :** \_\_\_\_\_

**TEACHER /NOMINATOR CONTACT :** \_\_\_\_\_

**SCHOOL PRINCIPAL NAME :** \_\_\_\_\_

**SCHOOL PRINCIPAL SIGNATURE :** \_\_\_\_\_

**SCHOOL PRINCIPAL CONTACT:** \_\_\_\_\_

All filled submission forms should be sent and returned to us via email: [gfiuramo@sipa.com.sb](mailto:gfiuramo@sipa.com.sb), or hand-delivered to our reception desk by 4:30 PM on 16th May 2025.