



NATIONAL
MEDIA
AWARDS



ESWATINI
NATIONAL
ASSOCIATION OF
JOURNALISTS

SWAZILAND
EDITORS
FORUM **SEF**

NATIONAL MEDIA AWARDS 2025

FORM B: NOMINATION FORM

Intended for Nomination. Journalists or editors can use this form to nominate 1) an emerging reporter who shows promise; 2) an editor whose leadership has shown impact and, or; 3) an individual whose life time contribution has made a significant impact on growth of the industry and promoted integrity, professionalism and excellence within it.

SECTION 1: NOMINEE DETAILS

Full Name: _____

Surname: _____

Media House / Institution: _____

Current Position / Role: _____

Contact Number: _____

Years Active in the Media Profession: _____

SECTION 2: CATEGORY SELECTION

SELECT YOUR CATEGORY

Please select the category you are nominating the individual for carefully, marking it with a **(tick)** in the far-right column. Please mark one category only per nomination form. **You can only nominate one person for each category.**

Lifetime Achievement Award

Editorial Leadership Award

Emerging Reporter Award



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SECTION 3: NOMINATION STATEMENT

Please provide a detailed statement (no more than 500 words) explaining why this individual deserves recognition under the selected category.

Guide: You may include examples of leadership, mentorship, editorial excellence, ethical conduct, innovation, or long-standing contribution to the media industry.

Nomination Statement: *Enter text below.*

SECTION 4: SUPPORTING EVIDENCE

Attach any supporting documents that strengthen your nomination (*optional*).

Professional bio or CV of the nominee

Endorsement letters or testimonials from colleagues or institutions

Links or references to notable editorial work or public contributions

Awards, recognitions, or significant achievements

SECTION 5: NOMINATOR DETAILS

Full Name: _____

Media House / Institution: _____

Position / Role: _____

Contact Number: _____

Email Address: _____

Relationship to Nominee: _____



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SECTION 6: NOMINATOR DECLARATION

I, the undersigned, confirm that the information provided in this nomination form is accurate to the best of my knowledge and that I have obtained consent from the nominee to submit this nomination.

Nominator Signature: _____ Date: _____

SECTION 7: FOR OFFICIAL USE ONLY

Nomination ID: _____

Date of Receipt: _____

Received By: _____

Eligibility Verified: Yes No

Notes: *Enter text below.*

Signature: _____