**CBAFF 2024 YOUNG LOGISTICS PROFESSIONAL AWARD - APPLICATION FORM**

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| **Name of Applicant:** |  |
|  |  |
| **Date of Birth:** |  |
|  |  |
| **Name of Employer:** |  |
|  |  |
| **Contact Address:**  *(State if home or work address)* |  |
|  |  |
| **Daytime phone #:** |  |
|  |  |
| **Email:** |  |
|  |  |
| **NZ citizen or Permanent Resident?**  *(Please specify)* |  |
|  |  |
| **Signature** |  |
|  |  |
| **Date** |  |

1. Complete and return the application form by **28 March 2024** together with details of employment history and qualifications (Curriculum Vitae).
2. Submit the 2000-word dissertation by **4 May 2024** following the report outline.

PLEASE SUPPLY ELECTRONICALLY

saved in MS Word format

###### 

**We reserve the right to:**

* **Inform CBAFF membership and media of the winner**
* **Not make an award in any particular year**

# Send the completed application to: Customs Brokers and Freight Forwarders Federation of New Zealand Inc

# E-mail: admin@cbaff.org.nz