



**COMMONWEALTH
SECRETARIAT**

**Application Form
EDUCATION GOOD PRACTICE AWARDS**

Country: _____

Title of Project: _____

Name of Organisation: _____

Contact Person: _____

Position: _____

Address of Organisation: _____

Telephone No: _____ Fax No. _____

E-mail address: _____

Action Area(s) addressed in submission:

Executive summary (50 words maximum)

Authorising Signature: _____
(Permanent Secretary/ Head of Organisation)

(THIS FORM MUST BE SUBMITTED AS THE COVERING SHEET)