**Entry Form**  

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **NOMINEE &COMPANY INFORMATION**  **( All fields are Mandatory )** | | | | |
| 1. Name of the Nominee: | | | | |
| 2. Company & Designation: | | | | |
| 3. Email ID: | | | 4. Mobile No: | |
| 5. Nominated for category: (Please tick appropriate) | | | | |
| Front Liner (FL) | | | | |  |
| Sales Supervisor (SS) **Please Fill Section A only** | | | | |  |
| Sales Executive (SE) | | | | |  |
| Territory Manager (TM) | | | | |  |
| NSM/SM | | | | |  |
| RSM/ASM **Please Fill Section B only** | | | | |  |
| Other Sales Support (Non-Executive/Executive) | | | | |  |
| Other Sales Support (Manager/Asst. Manager) | | | | |  |
| **COORDINATOR’S INFORMATION** | | | | |  |
| 6. Name: | | | | |  |
| 7. Email ID: | | | 8. Mobile No: | |
| \***Note**  – Each company should nominate a coordinator to notify/ communicate all nominees their respective details of dates and times for NASCO 2021 | | | | |
| **NATURE OF BUSINESS: (Please tick appropriate industry sector competing)** | | | | |
| **Alcohol & Tobacco** |  | **Industrial, Manufacturing & Energy** | |  |
| **Automotive** |  | **Insurance – General** | |  |
| **Corporate Sales** |  | **Insurance – Life** | |  |
| **Consumer Durables** |  | **Healthcare** | |  |
| **Agriculture** |  | **Shops & Showrooms (Chains & Standalone)** | |  |
| **Banking** |  | **Media** | |  |
| **Financial Service Providers** |  | **Modern Trade** | |  |
| **FMCG – Food** |  | **Telecommunication** | |  |
| **FMCG – Beverages** |  | **FMCG – Cosmetics & Others** | |  |
| **Fashion and Clothing** |  | **Other (Logistics, Hospitality, IT and E-Commerce, Real Estate & Constructions)** | |  |
| **Social Selling** |  |  | |  |

**Modern Trade**

**(MT)**

**No**

**Yes**

**Channel Preference**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| 10. Product/Service brands sold by the nominee: | |
| |  |  |  |  |  | | --- | --- | --- | --- | --- | | FL | SE | SS | TM | Other Total | |  |  |  |  |  |   11. No. of sales professionals reporting to the nominee: (Under Each Level)  **\*Not applicable for Front Liners** | |
| 12. Total value of business under the nominees control: Rs. | |
| 13. Geographical area or customer segment assigned to the nominee: | |
| 14. Job functions – Please list the main job functions of the nominee | |
| a. | |
| b. | |
| c. | |
| 15. Performance of the nominee for the calendar year ending 31st December, 2020 / 31st March, 2021 | |
| **Job function** | % Achievement VS Target |
| a) Sales volume |  |
| b) Sales value |  |
| 16. Special achievements of the nominee during last year (Why do you classify this nominee as a top performer in your organization? | |
|  | |
| **Declaration** | |
| I certify that,   * The information contained in this nomination form are true and accurate * The nominee has been working in our organization for the entire period under review in the category in which he is nominated * The organization will allow the nominee to participate in the interview process as well as the award ceremony | |
| Name (Head of the Sales/HR/Marketing): | |
| Designation: | |
| Email Address: | |
| Signature with the Seal: | |

**Nominee Code: (Only for Office Use)**

**Section A**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| 10. Product/Service brands sold by the nominee : | |
| |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | | FL/Non Executive | SE/ Executive | TM/ Executive | | RSM/ASM | | SM/NSM | | Other | Total | |  |  |  | |  | |  | |  |  | | Merchandiser | Junior Executive/ Executive | | Assistant Manager | | Channel Manager | | Head Of Modern Trade | | Total | | |  |  | |  | |  | |  | |  | |   11.  **General Trade**  No. of sales professionals reporting to the nominee: (Under Each Level)  **Modern Trade** | |
| 12. (a) Total value of business under the nominees control: Rs. | |
| (b) Value of business under Nominee as % of Total company business Volume: | |
| 13. Staff retention as % for period under review: | |
| 14. Other: | |
| 15. % of New Businesses for period under review : | |
| 16. Job functions – Please list the main job functions of the nominee | |
| a. | |
| b. | |
| c. | |
| 17. Performance of the nominee for the calendar year ending 31st December, 2020 / 31st March, 2021 | |
| **Job function** | % Achievement VS Target |
| a) Sales volume |  |
| b) Sales value |  |
| 18. Special achievements of the nominee during last year (Why do you classify this nominee as a top performer in your organization? | |
|  | |
| **Declaration** | |
| I certify that,   * The information contained in this nomination form are true and accurate * The nominee has been working in our organization for the entire period under review in the category in which he is nominated * The organization will allow the nominee to participate in the interview process as well as the award ceremony | |
| Name (Head of the Sales/HR/Marketing):  (In the case of SM/NSM, CEO/MD Should authorize) | |
| Designation: | |
| Email Address: | |
| Signature with the Seal: | |