**Company Name:**

Please complete this form with **five testimonials from internal clients/ stakeholders and their contact details** and upload it along with your Category Entry Form on the “Submit an Entry” page

|  |
| --- |
| ***Testimonial 1*** |
| **Name****Job Title** |  |
| **Company Name** **Address** **Telephone****Email** |  |
| **Testimonial** |  |

|  |
| --- |
| ***Testimonial 2*** |
| **Name****Job Title** |  |
| **Company Name** **Address** **Telephone****Email** |  |
| **Testimonial** |  |

|  |
| --- |
| ***Testimonial 3*** |
| **Name****Job Title** |  |
| **Company Name** **Address** **Telephone****Email** |  |
| **Testimonial** |  |

|  |
| --- |
| ***Testimonial 4*** |
| **Name****Job Title** |  |
| **Company Name** **Address** **Telephone****Email** |  |
| **Testimonial** |  |

|  |
| --- |
| ***Testimonial 5*** |
| **Name****Job Title** |  |
| **Company Name** **Address** **Telephone****Email** |  |
| **Testimonial** |  |