



ABTT Award for Costume 2024 Nomination Form

The ABTT Award for Costume seeks to celebrate the role of specialists in their field and the creative contribution they make to the production process. Those whom we wish to acknowledge will have delivered outstanding contributions through the departmental specialism of Costume in the roles of supervisor, associate and/or costume manager

ABTT Awards

Contact Details for Nominee:

Name:
Email:
Contact Number:

Criteria of Award:

- 1) They will have attained consistent employment during at least 8 years in a costume management role such as costume supervisor, associate and/or costume manager (formerly known as head of wardrobe).
- 2) Their costume management experience will have been in the live performance sector: i.e. in theatre, dance, opera, theatrical experiences in non-conventional spaces, such as live music ceremonies, immersive theatre, and carnival.
- 3) They will have achieved a command of their chosen discipline.
- 4) They will have consistently delivered at a level of excellence throughout their career.
- 5) They will have sought to promote best practice and technical excellence amongst their team whilst contributing to the delivery of world class performance.

Submission Guidelines: This form is a guideline and information should be submitted via email but can take the form of multiple documents as long as they are submitted in one email to admin@abtt.org.uk. Videos should be submitted via WeTransfer upload.

Nominator Name: (self nomination welcome)

Job Title/ Role of Supporter:

Contact email of Supporter:

Nomination statement: (Please address each point within the criteria. This statement can be submitted in writing or in video format. This should be no more than 500 words and can be submitted as a separate document.)



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Supporting Statements:

Please provide a minimum of 2 supporting statements.

These can be from peers, colleagues or employers and should be no more than 250 words.

Supporter 1 Name:

Job Title/ Role of Supporter:

Contact email of Supporter:

Supporting statement 1:

Supporter 2 Name:

Job Title/ Role of Supporter:

Contact email of Supporter:

Supporting statement 2:

Please include below any supporting documents which illustrate why you have made this nomination. This could be links to the nominees LinkedIn/ website, videos relating to their work/ press items relating to the individual if any:

Please 'X' box, if you are sending additional information to support your nomination separate to this form.
Please advise what else should be included in the email to ensure nothing is missing.

If you have any questions or access requirements please do contact us and we will be happy to assist.