

Stewards of Intangible Cultural Heritage Award 2024
Nomination Form (Individual)



**National
Heritage
Board**

**STEWARDS OF INTANGIBLE CULTURAL HERITAGE
AWARD 2024
NOMINATION FORM (INDIVIDUAL)**

General Instructions

All fields are compulsory and should be typed rather than handwritten. Please enter “N.A.” if the field is not applicable.

For softcopy submissions, please submit a completed softcopy of this form and all supporting documents (with a maximum of up to 10 MB in total file size) to: nhb_stewards@nhb.gov.sg.

For hardcopy submissions, please mail a completed hardcopy of this form and all supporting documents to:

Stewards of Intangible Cultural Heritage Award Secretariat
National Heritage Board
Stamford Court
61 Stamford Road #03-08
Singapore 178892

For enquiries, please email nhb_stewards@nhb.gov.sg.

Eligibility Criteria

Before starting on the form, please ensure that the nominee fulfils the following eligibility criteria; nominees that do not meet the eligibility criteria will not be considered for the Award.

- a. The individual must be practising one or more intangible cultural heritage (ICH) element(s), which is/are listed on the National Heritage Board's [ICH inventory](#).
- b. The individual must have been practising ICH for a minimum of 10 years.
- c. The individual must be a Singaporean Citizen or Permanent Resident who is 18 years old and above.

The Award will only be conferred upon individuals who are ICH practitioners – researchers, advocates, and/or managers of ICH organisations who do not themselves possess ICH knowledge and practice ICH skills are not eligible for the Award.

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The Award will not apply to practices that are overtly religious or spreads the teachings or beliefs of any one religion; and the Award will not be conferred posthumously.

Section 1: Nomination Method

Nomination Method (Please tick one)	<input type="checkbox"/> Self-nomination	<input type="checkbox"/> Nomination of Others
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Section 2: Nominee's Information

Salutation and Full Name of Nominee as in NRIC (Please underline surname)	(Please choose one) Mr./Ms./Mrs./Dr./Prof.	
NRIC No.		
Contact Details	Contact No.	Email
Registered Address		
Address of Practice, if different from Registered Address		

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ICH Element as listed in ICH Inventory* *The full inventory of ICH elements can be found on https://www.roots.gov.sg/ich-landing . Please refer to this link to view how the ICH element is listed and what category it falls under.				
Category of Intangible Cultural Heritage (“ICH”) up for nomination (Please tick at least one)	<input type="checkbox"/>	Performing Arts	<input type="checkbox"/>	Traditional Craftsmanship
	<input type="checkbox"/>	Oral Traditions and Expressions	<input type="checkbox"/>	Social Practices, Rituals and Festive Events
	<input type="checkbox"/>	Knowledge and Practices concerning Nature and Universe	<input type="checkbox"/>	Food Heritage

Section 3: Nominator’s Information

Please skip this section if you ticked “self-nomination” in section 1.

Salutation and Full Name of Nominator as in NRIC (Please underline surname)	(Please choose one) Mr./Ms./Mrs./Dr./Prof.	
NRIC No.		
Contact Details	Contact No.	Email

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Relationship to Nominee	
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Section 4: Details of the Nomination

Where relevant, further evidence (e.g. newspaper articles, photographs with accompanying captions, testimonials, reviews) can be submitted as an annex together with this form or as a separate attachment to it.

(a) Dedication to the Practice & Mastery of Skills and Knowledge

i. Evidence of long-term practice of and commitment to the practice

Please provide a write-up (max 300 words) describing the nominee's practice of the ICH element, including evidence that the nominee has been practicing for a minimum of 10 years.

ii. Evidence of excellence in application of knowledge and skills

Please provide evidence of the nominee's level of skill in and knowledge of the ICH element. Such evidence can take the form of, for example: awards and accolades received; participation in professional platforms; features in newspaper articles or photographs.

Nominees/nominators are also encouraged to submit evidence that demonstrates community recognition of the nominee's level of skill and knowledge. Examples of such evidence may include testimonials or reviews.

(b) Transmission of Skills and Knowledge

i. Evidence of outstanding efforts to transmit skills and knowledge

Please provide a write-up on the nominee's transmission efforts within the community and to the next generation. Examples may include the training of apprentices, mentoring of students, or undertaking research and documentation efforts.

The write-up should outline in detail the nominee's transmission efforts, including any opportunities and challenges faced in transmission, within at least the past 5 years. Nominees/nominators are also encouraged to submit evidence, such as testimonials, that demonstrates the impact of the nominee's transmission efforts.

ii. Evidence of regular efforts to promote awareness

Please provide evidence of the nominee's regular efforts to raise awareness of the practice, such as through public performances/demonstrations/workshops, or profiling the practice in other ways at a local/regional/international level.

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iii. Information on further plans for transmission

Successful nominees which are awarded will have the opportunity to tap onto \$20,000 in grant funding, to support projects related to the transmission of ICH skills and knowledge.

Beyond the nominee's past and existing efforts, please provide a write-up on how the nominee intends to continue with their transmission efforts in the future, and how the nominee intends to utilise the grant funding (if awarded) to implement further transmission initiatives.

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(c) Positive Impact and Influence

Please provide evidence of positive contributions to the community through the practice. Examples include efforts to encourage cross-cultural exchange, or to engage with and include various segments of society, such as underserved communities, in their practice.

The National Heritage Board (“**NHB**”) reserves the right to request for further information and/or certified true copies of supporting documents submitted.

For softcopy submissions, where applicable, please attach scanned copies of relevant supporting documents (letters of support, news articles, testimonials, videos and photographs, etc.) either as an annex to this form, or as separate email attachments.

For hardcopy submissions, where applicable, please attach photocopies of supporting documents only. Please do not submit original copies.

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Consent and Acknowledgement

If this is a **self-nomination**, please acknowledge the following:

<input type="checkbox"/> I confirm that I have been a practitioner of the ICH element named in this form for at least 10 years as of the date of submission.
<input type="checkbox"/> <u>Consent for use of personal data/information provided in this form</u> I consent to NHB's collection, use and disclosure of any personal data provided by me in this form, for the purposes of (a) assessment of this nomination, including to contact me for more information or in relation to the outcome of the nomination, and (b) archival and internal documentation purposes, in accordance with NHB's policies and processes relation to privacy and data protection. I understand that I may contact NHB to withdraw such consent, but this will result in the nomination being treated as withdrawn. I further consent to:- (a) the release of any information provided in this form to other public agencies for the purposes of assessing the nomination or for public policy analysis or formulation or public data analytics purposes, and to external auditors and assessors; and (b) NHB obtaining and verifying information from or with any source, as NHB may deem appropriate for the assessment of this nomination.
<input type="checkbox"/> <u>Declarations relating to truth/correctness of information provided in this form</u> I declare that the facts/information I have stated in this form and the accompanying information are true and correct to the best of my knowledge and that I have not withheld or distorted any material facts. I understand that I have a continuing obligation to promptly notify NHB if there is any change affecting any fact or information set out in this nomination.
<input type="checkbox"/> I agree to indemnify NHB against any claims made against NHB arising from or in connection with this nomination.

Name and Signature

Date

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If this is a **nomination of someone else**, please acknowledge the following:

<input type="checkbox"/> I confirm that I have obtained the informed consent of the individual I am nominating, as indicated in the “For Acknowledgement by Nominee” section below.
<input type="checkbox"/> <u>Consent for use of personal data/information provided in this form</u> I consent to NHB’s collection, use and disclosure of any personal data provided by me in this form, for the purposes of (a) assessment of this nomination, including to contact me for more information or in relation to the outcome of the nomination, and (b) archival and internal documentation purposes, in accordance with NHB’s policies and processes relation to privacy and data protection. I understand that I may contact NHB to withdraw such consent, but this may result in the nomination being treated as withdrawn. I further consent to:- (a) the release of any information provided in this form to other public agencies for the purposes of assessing the nomination or for public policy analysis or formulation or public data analytics purposes, and to external auditors and assessors; and (b) NHB obtaining and verifying information from or with any source, as NHB may deem appropriate for the assessment of this nomination.
<input type="checkbox"/> <u>Declarations relating to truth/correctness of information provided in this form</u> I declare that the facts/information I have stated in this form and the accompanying information are true and correct to the best of my knowledge and that I have not withheld or distorted any material facts. I understand that I have a continuing obligation to promptly notify NHB if there is any change affecting any fact or information set out in this nomination.
<input type="checkbox"/> I agree to indemnify NHB against any claims made against NHB arising from or in connection with this nomination.

Name and Signature of Nominator

Date

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For Acknowledgement by Nominee (where nominated by someone else)

<input type="checkbox"/> I consent to the above nomination.
<input type="checkbox"/> I confirm that I have been a practitioner of the ICH element named in this form for at least 10 years as of the date of submission.
<input type="checkbox"/> <u>Consent for use of personal data/information provided in this form</u> I consent to NHB's collection, use and disclosure of any personal data provided by me in this form, for the purposes of (a) assessment of this nomination, including to contact me for more information or in relation to the outcome of the nomination, and (b) archival and internal documentation purposes, in accordance with NHB's policies and processes relation to privacy and data protection. I understand that I may contact NHB to withdraw such consent, but this will result in the nomination being treated as withdrawn. I further consent to:- (a) the release of any information provided in this form to other public agencies for the purposes of assessing the nomination or for public policy analysis or formulation or public data analytics purposes, and to external auditors and assessors; and (b) NHB obtaining and verifying information from or with any source, as NHB may deem appropriate for the assessment of this nomination.
<input type="checkbox"/> <u>Declarations relating to truth/correctness of information provided in this form</u> I declare that the facts/information stated by my Nominator in this form and the accompanying information are true and correct to the best of my knowledge and that no materials facts have not withheld or distorted. I understand that I have a continuing obligation to promptly notify NHB if there is any change affecting any fact or information set out in this nomination.
<input type="checkbox"/> I agree to indemnify NHB against any claims made against NHB arising from or in connection with this nomination.

Name and Signature of Nominee

Date

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Submission Checklist

Before submitting, have I ensured that:	Indicate with a tick below if completed
All details, such as e.g. Nominees' Information, Nominator's Information (where applicable) and Declarations etc. are filled up correctly.	
Write-ups under Details of Nomination have been completed, are within the word limit and are substantiated by relevant pieces of evidence.	
All scanned copies or photocopies of supporting documents are included, either as an annex to this form or as separate email attachments.	
One (1) softcopy of nomination form and supporting documents will be submitted to NHB via email; OR One (1) hardcopy of nomination form and supporting documents will be submitted to NHB via mail.	