**Nomination form for adaptation contact points**

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| --- | --- |
| Party |  |
| Salutation |  |
| First name of nominee |  |
| Last name of nominee |  |
| Ministry/organization |  |
| Department |  |
| Position title |  |
| Address |  |
| Phone (landline and mobile) |  |
| Email |  |
| Web address |  |
| Brief description of adaptation-related work of the nominee at the national level |  |
| Adaptation focus area(s) (e.g. all areas, NAP, adaptation communication, NWP, gender, ACE) |  |
| Duration of role as contact point (leave blank if nomination is not time-bound) |  |
| Signature of nominated adaptation contact point |  |
| Name of nominating national focal point |  |
| Signature of nominating national focal point |  |

**Please email the completed form, preferably by 1 July 2022, to the UNFCCC secretariat at** **secretariat@unfccc.int****, with a copy to the Adaptation programme at** **adaptation@unfccc.int****.** Please use one form for each nomination in the case of multiple nominations.