

**APPLICATION FOR “THE GUIDE ASSOCIATION - LINCOLNSHIRE SOUTH
CERTIFICATE OF RECOGNITION AND APPRECIATION”**

All nominations should be made without the knowledge of the nominee. Please refer to the Notes and Guidelines for the award. Please complete all sections and give the detailed reason for the nomination overleaf.

This form can be sent at any time but by September 30th of each year to the County Awards Committee Chairman.

Please complete in block capitals and include your contact details in case further information is required.

<u>PERSONAL DETAILS OF NOMINEE:</u>	<u>GUIDING DETAILS OF NOMINEE</u>
TITLE (Miss/Mrs/Ms/Mr/Other)	UNIT/GUILD
SURNAME	DISTRICT
FORNAME(S)	DIVISION
HOME ADDRESS	APPOINTMENT(S) HELD AT TIME OF NOMINATION
POSTCODE	

<u>DETAILS OF NOMINATOR:</u>	<u>GUIDING DETAILS OF NOMINATOR</u>
TITLE (Miss/Mrs/Ms/Mr/Other)	UNIT/GUILD
SURNAME	DISTRICT
FORNAME(S)	DIVISION
HOME ADDRESS	RELATIONSHIP TO NOMINEE
POSTCODE	I HAVE KNOWN THE NOMINEE FOR _____ YEARS I HAVE SUBMITTED DETAILS THAT ARE TRUE TO THE BEST OF MY BELIEF AND RECOMMEND THE NOMINEE TO RECEIVE THE AWARD
TEL:	SIGNED
E-MAIL	DATE

For County use:	Recommended/not recommended to CC
Date received	Endorsed by CC on
Date considered	CCs Signature
	Date award presented

PLEASE GIVE ALL RELEVANT DETAILS OF THE NOMINEE TO JUSTIFY ELIGIBILITY FOR THE AWARD