

**AWARD NOMINATION FORM**

(To be used when nominating a candidate for an Award)

Nominees Full Name:

Nominees Current Position in Guiding:

Nominees Membership Number:

Reason for Nomination: (Please use additional sheet if necessary)

Has Nominee previously received any award from Girlguiding? YES/NO/Not known\* (if Yes, please give details)

Which Award are you nominating this person for? (select one only)

County Good Service/County Thank You/County Certificate of Merit/National Good Service

Signature of Proposer: Signature of Seconder:

Print Name: Print Name:

Appointment: Appointment:

Membership Number, Email and contact telephone number of Proposer:

Please return this form to the County Office:

ggbucks@girlguidingbuckinghamshire.org.uk and awards@girlguidingbuckinghamshire.org.ukj

Please mark the email as ‘Confidential’ and ‘for the Attention of the Chairman County Awards Committee. Postal nominations will need to be sent to the County Office clearly marked for the attention of the Chairman of Awards Committee – also marked “Confidential”