

BORONIA AWARD NOMINATION FORM

- This form is to be used for nominations for the Boronia Award **only**.
- This form is to be completed by any Adult Member wishing to recognise the good service of an Adult Member or Trefoil Guild Member, at a local level.
- For details about these Awards refer to the information online.
http://www.guidelinesforgirlguides.org.au/guide_lines/roles-recognition-development/girl-guide-awards-recognition/good-service-awards-for-members/boronia/
- The application is made without the knowledge of the recipient.
- It is the Proposer's responsibility to ensure all information and letters required to support this nomination are included at the time of submission.
- Send the completed nomination form and supporting information clearly marked '**CONFIDENTIAL**' to the relevant Region Manager who will forward the form to the State Office for certificate preparation and database recording.

Please type or print clearly with a black pen.

Personal Details of Member Being Nominated For the Award

Preferred Title:	Given Names:	Surname:	
Address:		State:	Postcode:
Phone (BH): ()	Phone (AH): ()	Mobile:	
Email:			
Membership No:	Expiry: / / 20		
Current Position in Guiding:			
Guide experience and service past and present (including dates):			

Proposer's details

Name:	Signature:	Date: / / 20
Membership No:	Relevant Phone No/s:	
Email:	Position in Guiding:	
Proposers Comments (if more space required, please attach a separate sheet – only include information that is		

relevant to Guiding service.)

Additional Supporter's details

Name:	Membership No:
Signature:	Date:
Supporters Comments: <i>(Please note: Additional information in support of this nomination can be submitted on a separate sheet.)</i>	

Aspects of the Nomination which are to be highlighted in the Certificate Citation:

Proposed Date of Presentation:

Please note that this date must be at least two months after nomination submission

Approval of Nomination by the Region Manager

(as per Descriptor and Delegations Guideline)

Name:	Role:
Signature:	Date:

FOR OFFICE USE ONLY:

Nomination Received:	Financial Checked:	Award Recorded on Database:
Citation Prepared:	SGGO Office notified to prepare certificate badge:	
Badge & Certificate sent to relevant Region Manager:	State Awards Committee and State Commissioner Notified:	
Notes		