NOMINATION FOR STATE/NATIONAL TREFOIL GUILD ADVISER FORM ATG.1

NOMINATION FOR:

PERSONAL DETAILS





First Name:	Last Name:					
State:	ı	Postcode:		Email:		
Age group: Under 45	45-54	55-64	65-74	75+		
Mobile:	Phone:					
GGA member no.: Total length of ATG membership:						
Trefoil Guild(s) in which membership held:						
Date of last membership	payment		Date of Prom	nise renewal as ATG member:		
EXPERIENCE						
Details of experience and all Trefoil Guild membership:						
Girl Guiding experiences:						
Committee memberships:						

WORK EXPERIENCE AND QUALIFICATIONS					
WHAT CONTRIBUTION COULD YOU MAKE TO THIS ROLE AND HOW?					
Nomination Accepted:		Date:			
(Signature of Nominee)		3 410.			
PROPOSER'S STATEMENT	г				
Comments:					
Name:	Signature:	Date:			

Attach a photo of yourself in Trefoil Guild dress and please wear Trefoil Guild dress to the interview. Return this form to your State Trefoil Guild Adviser or the Australian Trefoil Guild Adviser.

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