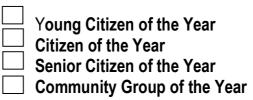
Nomination Form Port Macquarie-Hastings Council 2013 Australia Day Awards







PLEASE SELECT ONLY ONE CATEGORY ABOVE

A fair go, a concern for the environment, desire for prosperity with a share for all, participation in sport, cultural diversity, the importance of strong community values and support systems and a keen sense that we have our own contribution to make in the community.

CONDITIONS

- 1. Nominees must be Australian citizens and permanently live in the Port Macquarie-Hastings Local Government Area.
- 2. Nominations must be on this Official Form or made online via Council's website. Please ensure all sections of the Form are duly completed.
- 3. The nomination may include references, information on academic level achieved, extracurricular activities in school/workplace, newspaper cuttings, award certificates, etc. **Maximum of five (5) documents in total.**
- 4. Nominations must be received at the Port Macquarie-Hastings Council office no later than **FRIDAY 7 DECEMBER 2012**. A recent photo of the nominee and a completed photography consent form must accompany the nomination.
- 5. The decision of the Judging Panel is final and no correspondence will be entered into in respect of the decision.
- 6. If the nominated person is listed as a finalist in this category, the person nominated **MUST ATTEND** the Award Presentation to be held on the evening of Friday 25th January 2013.
- NO SELF NOMINATIONS WILL BE ACCEPTED.

PART 1 – DETAILS OF PERSON BEING NOMINATED FOR AUSTRALIA DAY AWARD SELECTED ABOVE

Nominee's Name: Mr/Mrs/	Ms			
	FIRST NAME	LAST NAME		
Name of Community Group				
	Only to be completed when nominating	g for Community Group of the Year		
Address:				
		Post Code:		
Phone Numbers:	(daytime)	(mobile)		
Nominee's Email Address .				
Nominee's Date of Birth	/(Not Applicable to Cor	mmunity Group Nominations)		

Is the nominee an Australian Cit	tizen? Yes - Born in Australia					
	Yes – Taken out Australian C	Citizenship				
	No – Nomination unable to p	roceed				
	Community Group Nomination	on – Not applicable				
	Proof of Australian Citizenship ma					
Does the nominee permanently	live in the Port Macquarie-Hastings Local C					
Yes No – Nomination unable to proceed						
PART 2 – TO BE COMPLETED BY PERSON SUBMITTING NOMINATION						
Nominator's Name: Mr/Mrs/Ms.						
	FIRST NAME	LAST NAME				
Address:						
Phone Numbers:	(daytime)	(mobile)				
Nominator's Email Address						
Organisation Represented (if an	y):					
Nominator's Phone Numbers: .	(daytime)	(mobile)				
Have you as the Nominator of the	nis Australia Day Award sought and been g	ranted permission from the Nominee to				
submit this nomination?	Yes - Permission sought and granted by	nominee				
	No – Permission not sought or gained to	make nomination				
	inators are requested to seek permissio oceed with prior to the submission of the					
SUMMARY OF NOMIMNEE'S	SIGNIFCANT CONTRIBUTION AND ACHI	EVEMENTS				
Please describe the nominee's	significant contributions or achievements					

Please describe how the nominee's contribution and /or service have benefited our community?				
Please describe the circumstances associated with the nominee's contribution including displays of significant initiative,				
individuality, ingenuity, compassion, generosity, bravery or sacrifice?				
Additional material including photographs, certificates, media articles/and or supporting references may be attached				

Limit of five(5) documents in total to be attached.

REFEREES			
First Referee's Details			
Mr/Mrs/Ms			
	FIRST NAME	LAST	NAME
Address:			
		Post Cod	e:
Referee's Phone Numbers:	(daytime)		(mobile)
Referee's Email Address			
Organisation Represented (if any):			
REFEREES			
Second Referee's Details			
Mr/Mrs/Ms			
	FIRST NAME	LAS	T NAME
Address:			
		Post Cod	e:
Referee's Phone Numbers:	(daytime)		(mobile)
Referee's Email Address			
Organisation Represented (if any):			
Recent Photograph Attached		YES	
Photography Consent completed a	nd attached	YES	
The nominee hereby agrees that the	e photograph at	tached to this nomination form	n may be reproduced in print and
electronic format for media purpose	s for Port Macq	uarie-Hastings Council	YES
Additional Supporting Documentation	on attached (ma	aximum 5 documents)	YES NO
Signature			
Nominator	to sign		

COMPLETED NOMINATION FORMS MUST BE RECEIVED AT COUNCIL BY NO LATER THAN FRIDAY 7 DECEMBER 2012

Please Post to:

The Australia Day Sub Committee Port Macquarie-Hastings Council PO Box 84 PORT MACQUARIE NSW 2444

