



## CERTIFICATE OF MERIT - AWARD NOMINATION FORM

(To be used when nominating a candidate for a County Certificate of Merit)

Nominees Full Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_ Post Code: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Current Position in Guiding: \_\_\_\_\_

History in Guiding: Please attach a copy of the nominee's Go! Record.

Reason for Nomination:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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

\_\_\_\_\_

Signature of Proposer: \_\_\_\_\_ Signature of Seconder: \_\_\_\_\_

Proposer: \_\_\_\_\_ Seconder: \_\_\_\_\_

Appointment: \_\_\_\_\_ Appointment: \_\_\_\_\_

Email and Contact Telephone Number of Proposer:

\_\_\_\_\_  
\_\_\_\_\_

(ALL NAMES IN BLOCK CAPITALS and INCLUDE MEMBERSHIP NUMBERS)

Date: \_\_\_\_\_

Please return this form to the County Office:

Girlguiding Buckinghamshire, 3 Walton Terrace, Walton Street, Aylesbury, Bucks HP21 7QY

Please mark the envelope as 'Confidential' and 'for the Attention of the Chairman County Awards Committee'

\* Delete as applicable