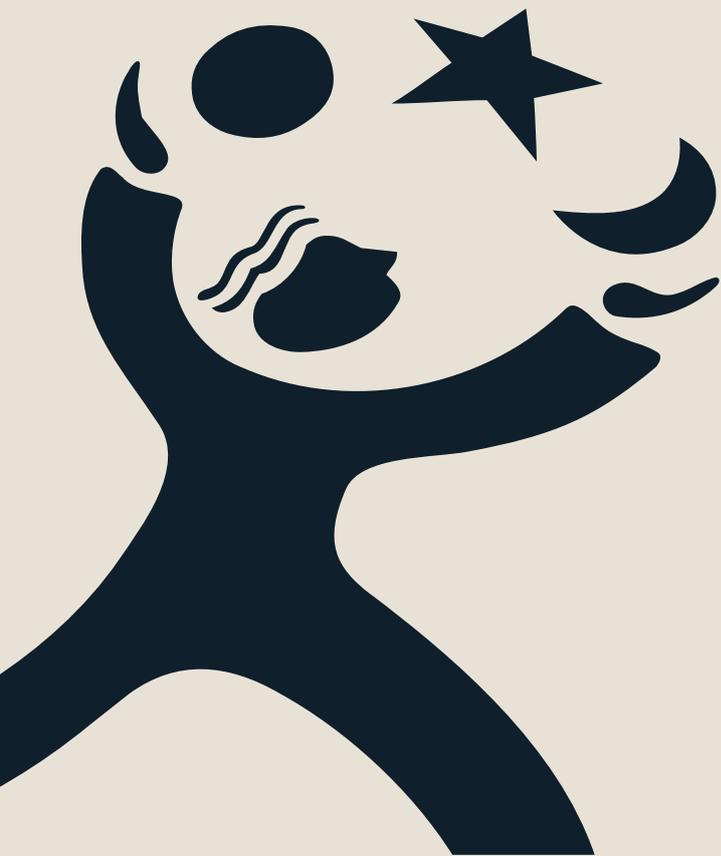


2024 Community Service Awards

Nomination Form



1. Type of Nomination (please place a cross ☒ in an appropriate box)

- Individual Nomination
- Community Group Nomination

2. Nomination Category (Please place a cross ☒ in an appropriate box)

- Aged
- Community Service
- People Who Make a Difference
- Sport and Recreation (Including Arts and Culture)
- Youth (25 years and under)

3. Details of individual/community group being nominated

| | | | |
|---------------------|--|-----------------|--|
| Name | | | |
| Address | | | |
| Suburb | | | |
| State | | Postcode | |
| Phone (Home) | | Mobile | |

4. Nominator's Details

| | | | |
|--------------------------------|--|-----------------|--|
| Name | | | |
| Home Address | | | |
| Suburb | | | |
| State | | Postcode | |
| Phone (Home) | | Mobile | |
| Relation to the nominee | | | |

5. Summary of achievement

Please provide clear details of contribution/work/services provided by the nominee, including their role, the number of years of involvement and approximate number of hours per week spent in each area.

Please complete one table for each organisation that the nominee volunteers/supports/contributes to/with.

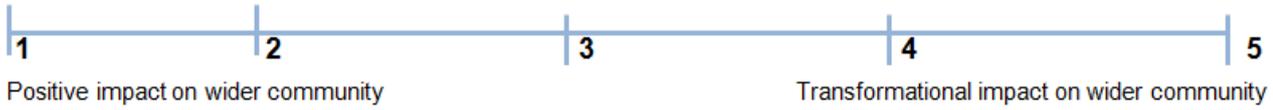
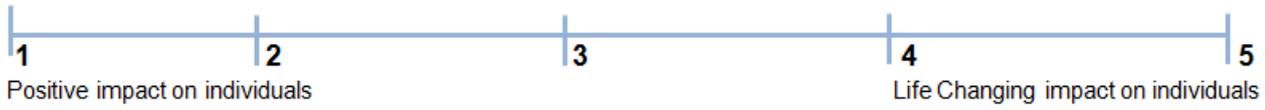
| | |
|-----------------------------------|--|
| Name of organisation/group | |
| Role of organisation/group | |
| Volunteer role/service | |
| Year commenced | |
| No. of years volunteering | |

Second organisation/group (if applicable)

| | |
|-----------------------------------|--|
| Name of organisation/group | |
| Role of organisation/group | |
| Volunteer role/service | |
| Year commenced | |
| No. of years volunteering | |

2. Number of people reached and level of impact because of the nominee's contribution (please circle).

| | | | | |
|---------------|----------------|-----------------|------------------|-------------|
| 0 – 20 people | 20 – 50 people | 50 - 100 people | 100 – 200 people | 200+ people |
|---------------|----------------|-----------------|------------------|-------------|



Please provide summary/evidence to support the chosen number and level of impact.

3. Any additional information highlighting/ showcasing the nominee's positive impact/ contribution to the Belmont Community?

Note: If required, please attach additional pages to this nomination form.

Checklist

Before you apply, please ensure you have:

- Completed the nomination form by including all relevant details.
- Attached any supporting documentation to assist with the nomination.

Nomination Declaration

I, (please insert full name)

declare that the information provided is correct to the best of my knowledge.

Signature: _____ Date: _____

Please submit your application by **5pm Monday, 17 June 2024** in one of the below ways:

- In person City of Belmont Civic Centre
215 Wright Street
Cloverdale WA 6105
- Post Economic and Community Development
City of Belmont
Locked Bag 379
Cloverdale WA 6985
- Email community.development@belmont.wa.gov.au