

Please complete this form with as much detail as possible. The more detail, the easier it is to make an award. If you are uncertain of information, please set that out. If necessary, add additional pages if there is insufficient space on the form.

If you are putting someone else forward for a Service Award, consider asking them for any missing information.

This application together with all supporting documentation is to be sent to your **RTC:** Adult Support (or the **RC** in the absence of an RTS: Adult Support) who will verify the service records. Please copy the Chair: National Adult Support in all your correspondence (<u>loy.Hutchinson@scouts.org.za</u>) This applies to all Service Awards.

**Please note: Proposals and recommendations must be treated as confidential** as a refusal or an award of a different grade of award from the initial proposal or recommendation, can be highly embarrassing should the candidate be aware of the initial proposal or recommendation.

## **Details of Nominee/Candidate:**

Full Names:									
Length of Service	e as an A	Adult wit	h SSA:						
Most recent service award (if known):									
Role in Scouting	at Prese	nt:							
Which Units / Dis	stricts /R	egions i	s this p	erson	associ	ated v	with?		
Details of Nominator (Your Details):									
Full Names:									
Telephone No:									
Email Address:	Email Address:								
Details of Nomi	nee's N	ext-in-l	ine So	couter	s:				
Full Names:	Full Names:								
Position(s) held i	n Scouti	ng at Pro	esent:						
Telephone No:									
Email Address:									
			il as p	ossibl	e the	scou	ting history of	the candidate,	with a particular
focus on the dates of service.RoleGroup NameStart DateEnd DateYears' Service									
		<u> </u>							
General:									
General:									

In the box below please set out details of any people who you think could provide more insight into the candidate and the sort of service that they render. In particular, please set out anyone who knew the candidate and their contribution to scouting before you met them.

Full Names:	
Telephone No:	
Email Address:	
Full Names:	
Telephone No:	
Email Address:	

Is there any other corroborating evidence of the service, for example a newspaper article? If so, please attach a copy to this form.

If you have a copy of the nominees scouting cv, please attach this to the form, this is very helpful in assessing a candidate.

## **APPROVAL PROCESS:**

## RTC: ADULT SUPPORT / REGIONAL COMMISSIONER

Verification of Service:	Yes	No	
Comments:			
Date:			
Name:			
Contact No:			Signed: Adult Support/Regional Commissioner

Date:

Date email sent to <a>ServiceAwards@scouts.org.za</a>

## SCOUTS SOUTH AFRICA

Award Processed Award uploaded to SD where applicable Award dispatched to Region and RC advised Database updated accordingly

Date:	
Date:	
Date:	
Date:	