



RECOMMENDATION FOR COMMONWEALTH VOLUNTEER HONOUR AWARD

Nominee's full name (please print or type: _____)

Full Address: _____

Telephone: _____ Postal Code _____

E-mail address: _____

Previous Commonwealth Awards

Year Awarded

Commonwealth Award now proposed:

Date of submission:

CITATION

Please give brief details of nominee's volunteer history with the Lifesaving Society.

Continue of separate sheet if necessary

DEADLINE FOR NOMINATION : December 31st

<i>Office use only</i>		
<i>Date received:</i> _____		
<i>Accepted</i>	<i>Yes</i>	<i>No</i>
<i>Comments:</i> _____		
