

## 2025 Community Citizen of the Year Awards Nomination Form



## **NOMINATION FOR:**

Please tick the appropriate box for your nomination

- □ Shire of Dalwallinu Community Citizen of the Year
- □ Shire of Dalwallinu Community Citizen of the Year Youth (under 25)
- □ Shire of Dalwallinu Community Citizen of the Year Senior (65 years or over)
- □ Shire of Dalwallinu Active Citizenship Award (for a community group or event)

*Please complete all the details below. Use block letters and print clearly.* **NOMINEE** 

Title (Mr/Mrs/Dr/Prof)	Given Names	Surname
Group (If Applicable)		
Address	Town	Postcode
Email		
Telephone Mobile	Other	
<b>REASONS FOR NOMINATION</b> How has the Nominee demonst <i>information if required</i> )		nent of community life? (Attach additional
How has the Nominee's contrib	oution been recognised elsewhere? (At	tach additional information if required)
NOMINATOR (Your details)		
Title (Mr/Mrs/Dr/Prof)	Given Names	Surname
Email		
Telephone Mobile	Other	
REFEREE/ALTERNATIVE PERS	SON	
Title (Mr/Mrs/Dr/Prof)	Given Names	Surname
Email		
Telephone Mobile	Other	

Please direct any queries you have in relation to this nomination to Deb Whitehead at ea@dalwallinu.wa.gov.au Please submit your nomination to the Shire of Dalwallinu by 18 November 2024