 **YOUNG PERSONS AWARD NOMINATION FORM**

All applications must be made without the knowledge of the nominee or her family. Please read the criteria for this award carefully.

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| Nominees Full Name: |
| Membership Number: |
| Unit: |
| District: |
| Division: |
| Guiding History: |
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| Reason for Nomination: |
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|  Nominators Full Name: |
|  Address: |
|   |
|   Post Code: |
| Telephone No. |
| E-mail Address: |
| Unit: |
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| This form should be sent to Girlguiding Essex North East County Office, Unit 7, Park Farm, Kelvedon Road, Inworth, Colchester,CO5 9SHoffice@girlguidingessexne.org.uk |