 

 **Derbyshire Girlguiding Spirit of Guiding Award**

**Application Form**

**Nominees must be members of Girlguiding Derbyshire between the age of 5 years and their 26th Birthday. Anyone can nominate a girl for the award but this form must be counter-signed by the unit leader and a commissioner.**

Please complete in black Ball point pen.

**Nominees Details:**

Name ....................................................................... Age ........................................................

Section.............................................................Unit.....................................................................

Address: …………………………………………………………………………………………………………………………………

Contact Email: ……………………………………………………………………………………………………………………….

Area/District................................................................................................................................

Membership number..................................................................................................................

**Reason for nomination: (use continuation sheet if applicable)**

**................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................**

**............................................................................................................................................**

**............................................................................................................................................**

**............................................................................................................................................**

**............................................................................................................................................**

**............................................................................................................................................**

**............................................................................................................................................**

**............................................................................................................................................**

**............................................................................................................................................**

**............................................................................................................................................**

This application is nominated by:

Full Name....................................................................................................................................

Address........................................................................................................................................

Telephone No....................................... Signed...........................................................................

Unit Leader Signature & Membership number ……………………………………………………………………..

Area/District Commissioner:

Full Name....................................................................................................................................

Address ………………………………………………………………………………………………………………………………..

Telephone No......................................

Commissioner Signature & Membership number ....................................................................

**Please send all completed forms to:**

**Cynthia Simmonds. c/o Girlguiding Derbyshire, Suite 3C Unicorn Business Park, Wellington Street, Ripley, Derbyshire DE5 3EH. Chair of Derbyshire Awards Committee. Telephone no. 01773 748151 e-mail awards@girlguidingderbyshire.org**

**…………………………………………………………………………………………………………………………………………..**

**For use of Awards Committee only:**

**Result of nomination: ………………………………………………………………………………………………………..**

**Signed by County Commissioner ……………………………………………………………………………………….**

**Date …………………………………………………………………………………………………………………………………**