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| NOMINATION FORM  Surf Life Saving SA SURF LIFESAVER OF THE YEAR | | |
| **\* ALL SECTIONS OF THE NOMINATION FORM IS TO BE COMPLETED\***  **(Nomination forms incomplete and/or incorrectly presented will not process to next stage)** | | |
| **Please note: Club Member making the submission may be contacted by a SLSSA staff member/volunteer for more information if required.**  **\*Please provide a day time contact number:** Click here to enter text. | | |
| Name of Nominee: Click here to enter text. | | Club: Click here to enter text. |
| Nominee contact number: Click here to enter text.  Nominee email address: Click here to enter text. | | |
| **You must be a current financial member of SLSA, in good standing.**  **Please ensure your profile in Surfguard is up to date with all awards and proficiencies.** | | |
| Patrol hours rostered 2016/17: Click here to enter text.  Patrol hours achieved2016/17: Click here to enter text. | | |
| Summary: What have been your Three key achievements in the 2016/17 season?   * Click here to enter text. * Click here to enter text. * Click here to enter text. | | |
| Which of the Three above achievements do you consider your most outstanding achievement for 2016/17?  Click here to enter text.  Why do you consider this as your most outstanding achievement?  Click here to enter text. | | |
| Describe your contribution to surf lifesaving patrol duties in 2016/17:  Click here to enter text. | | |
| Describe how you have demonstrated commitment to public safety:  Click here to enter text. | | |
| What lifesaving positions have you held at Club/State/National level in 2016/17?  Click here to enter text.  What have been your major lifesaving achievements at Club/State/National level in 2016/17?  Click here to enter text. | | |
| What are your future lifesaving ambitions at community, Club, State and National level?  Click here to enter text. | | |
| What do you see as the current and future challenges in active surf lifesaving duties?  Click here to enter text.  How can these challenges be overcome?  Click here to enter text. | | |
| Describe your achievements in patrol duties in the 2014/15 and 2015/16 seasons?  Click here to enter text. | | |
| Any other information?  Click here to enter text. | | |
| **\*Please note: The winner of this award will be put forward as the SA nominee for the National award and will require attending an interview with SLSSA Awards & Recognition Committee and will require presenting a 3 minute presentation to SLSA. Please check and be aware of the National application criteria.** | | |
| CLUB ENDORSEMENT | | |
| Name of Club: Click here to enter text. | Name of Club representative: Click here to enter text. | |
| Position: Click here to enter text. | Phone number: Click here to enter text. | |
| Email address: Click here to enter text. | | |
| Comments/endorsement:  Click here to enter text. | | |
| Signed: Click here to enter text. | | Date: Click here to enter a date. |
| **CHECK LIST:**  **All sections completed**  **Any additional information attached**  **Photographs attached (JPEG and minimum 2MB in size)**  **Print out of patrol hours, awards and proficiencies (found on the SLSA members portal)**  **Signed and endorsed by club** | | |