

GILGANDRA SHIRE

SENIOR CITIZEN OF THE YEAR AWARD

I wish to nominate:	
Name:	
Address:	
Telephone Number:	
fc	or the Gilgandra Shire Senior Citizen of the Year Award.
(Please note that the <u>nomine</u> be retired from full time wor	ee cannot be a couple. The nominee must be 60 years or over and k).
_	anisations in which the nominee has been actively twelve months and the nature of service to the
Organisations	Nature of service to the organisation

Please include any further information relevant to this nomination on a separate sheet.

Details of past voluntary service to the community (prior to the last twelve months):

Name of Organisation	Nature of Service	Length of Service	
Has the nominee been the recipient of any other award recognising community service? YES/NO .			
If so, details of award			
Name of Proposer _			
Organisation (if applicable)			
Phone	(business)	(private)	
	_		

PLEASE RETURN TO: Gilgandra Shire Council

P.O. Box 23

Signature _____

Gilgandra, NSW, 2827

Before 5pm Friday, 8 March 2024.

Date ____