**NOMINATION FOR AWARD FORM**

Please use the form below and if possible send by email, preferably in Word, to [RoyalHumaneSociety@fire.nsw.gov.au](mailto:RoyalHumaneSociety@fire.nsw.gov.au)

Alternatively, the form can be completed and forwarded to:

Royal Humane Society of New South Wales Inc,   
PO Box A830   
Sydney South NSW 1235

The Statutory Declaration available on our website must be completed and forwarded by the person making the nomination(s) to the PO Box above.

Only one form is to be provided for all nominees involved in an incident.

Please note that nomination(s) must be made within 5 years of the incident.

The nominee(s)  
With regard to each person nominated please provide:

1. **Full name and address.**

Click or tap here to enter text.

1. **Age and occupation (if known).**

Click or tap here to enter text.

1. **Telephone numbers (if known).**

Click or tap here to enter text.

1. **Whether the person has been nominated for any other awards of which you are aware.**

Click or tap here to enter text.

1. **Any other relevant information about the nominee.**

Click or tap here to enter text.

Person(s) rescued or attempted to be rescued  
With regard to each person rescued or attempted to be rescued please provide:

1. **Full name and address.**

Click or tap here to enter text.

1. **Age (if known).**

Click or tap here to enter text.

1. **Telephone numbers (if known).**

Click or tap here to enter text.

1. **Any other relevant information about the person.**

Click or tap here to enter text.

Incident giving rise to nomination

1. **Date, time and place of incident.**

Click or tap to enter a date.

1. **If relevant, weather and other prevailing conditions.**

Click or tap here to enter text.

1. **Were you present when the incident occurred? If not please indicate the source of your knowledge about it.**

Click or tap here to enter text.

1. **Describe the facts of the rescue in chronological order and what action each nominee(s) took including the degree of risk involved.**

Click or tap here to enter text.

1. **Details of any emergency services in attendance (e.g. police, ambulance, fire).**

Click or tap here to enter text.

1. **If you are aware of any court proceedings arising out of the incident e.g. inquest, criminal charge please provide details.**

Click or tap here to enter text.

1. **Result of rescue attempt.**

Click or tap here to enter text.

Supporting documents

1. **Please furnish an itemised list of all documents provided in support of the nomination(s).**

Click or tap here to enter text.

Particulars of person nominating

1. **Full name and address.**

Click or tap here to enter text.

1. **Occupation.**

Click or tap here to enter text.

1. **Daytime telephone number and mobile number**

Click or tap here to enter text.

1. **Email address.**

Click or tap here to enter text.

1. **Relationship to any persons nominated.**

Click or tap here to enter text.

Date of completion of nomination form. Click or tap to enter a date.

Signature of person nominating

Click or tap here to enter text.