

## LIFE GOVERNOR AWARD

### Nomination Form

***Life Governor Award is the highest individual service award for Little Athletics Victoria volunteers.***

Nomination is required to conform to criteria in Regulation 14 (Administrative Requirements for Service Awards of The Association), in particular Section 1 Clauses 1.3

A minimum of fifteen years consecutive Highly Meritorious Service of an Exemplary Nature that has positively contributed to the betterment of the Association. A minimum of ten years of such service must be outside the member Centre in an operational, administrative or key role at Region/ State Association level. This includes voluntary service above and beyond general expectations and includes key roles or positions at State Association competitions. The service outside the member Centre may be concurrent with continued service at the Centre.

**Highly meritorious service** as referred to in the Constitution is taken to mean service of excellence and of superior quality that has contributed to improving the operations of the Association and has benefited the members.

**Exemplary nature** is taken to mean being commendable and/or being a role model to others, and contains elements of having positively changed the nature of the way the Association operates.

<b>SECTION 1</b>	<b>This section is to be completed by the nominating body, and forwarded to the Association Office. For Annual cut-off date for submissions refer "LAVic web link". Remember to include a photograph of the nominee, and a copy of the minutes of the meeting at which the nomination was approved.</b>
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<p>On behalf of the _____ Centre/Region, we nominate _____ for the Life Governor Award.</p>
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## SUMMARY OF SERVICE RECORD

Outline below positions held and dates along with additional information (if applicable) -

Dates	Position	Where Centre/Region/State	Comments

Nominee Name: \_\_\_\_\_



**Attached are:**

- Minutes of meeting at which the person was nominated:
- Evidence of highly meritorious service of an exemplary nature
- Photograph of the nominee

<b>Dated</b> ...../...../..... DD MM YYYY
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**Signed:** \_\_\_\_\_  
Centre/Region President

**Signed:** \_\_\_\_\_  
Centre/Region Secretary

**Name** \_\_\_\_\_  
Please Print

**Name** \_\_\_\_\_  
Please Print

*Completed nominations to be emailed to [office@lavic.com.au](mailto:office@lavic.com.au) or posted to*

*Attn: LAVic, Locked Bag 1011, Port Melbourne, Victoria, 3207*

**Nominations are to be treated discreetly. Nominee should be unaware of proposal.**

Nominee Name: \_\_\_\_\_