

APF AWARD NOMINATION FORM

Mail or send to APF PO Box 1440, Springwood QLD 4127
P-(07) 3457 0100 ~ F-(07) 3457 0150 ~ E-apf@apf.asn.au ~ W-http://www.apf.asn.au

Applications must refer to the guidelines outlined on the award application form.

Advice to APF State Councils

State councils should discuss nominations 'in camera' and must provide contact details for one nominator.

Please describe below the nominee's outstanding service and include examples that best show their achievement and contribution. As a guide, you may wish to consider some of the following questions:

- 1. In what role(s) or area(s) has the nominee excelled?
- 2. How has the nominee demonstrated service worthy of recognition?
- 3. How has the nominee's contribution impacted on either a particular field, of parachuting, or locality, group, or the sport at large?
- 4. Over what period of time has the nominee made a major commitment?
- 5. Has the nominee's contribution been recognised elsewhere (e.g. in the media, by other awards, local clubs or an Area Council)?

NOMINEE'S NAME:	
APF NUMBER (if known):	
If the nominee is not a current APF Memb	per, please provide:-
Date of Birth: / / /	
Address:	
NOMINATORS CONTACT DETAILS:	
NOMINATORS NAME:	
Address:	
Phone (Home):	_ Phone (Work):

FORM - 01

DESCRIPTION	
In what role(s) or area(s) has the nominee excelled?	
2. How has the nominee demonstrated service worthy of	recognition?

FORM - 01

3.	How has the nominee's contribution impacted on either a particular field, of parachuting, or locality, group, or the sport at large?
4.	Over what period of time has the nominee made a major commitment?
5.	Has the nominee's contribution been recognised elsewhere (e.g. in the media, by other awards, local clubs or an Area Council)?