### Nomination Form B for Active Citizenship (Group/Event)

For Individual categories, request Nomination Form A from your council.

NOTE: all fields marked with \* are mandatory.



We're all part of the story

Australia Day Council of Western Australia

1.	GROUP,	/EVENT	REPRESEN	TATIVE	DETAILS
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GIVEN NAME*	FAMILY NAME*	EMAIL*				
GROUP/EVENT NAME*	EMAIL*		PHONE			
ADDRESS (If you do not know th	e address, please simply include the	e City, State and Postcode)	CITY*	POSTCODE*		
2. WHICH ORGANISATION	(S) HAS THE NOMINEE BEEN	MOST INVOLVED IN? (E.g. St J	ohn WA)			
3. IS IT A GROUP OR EVEN	T? *					
EVENT (Do NOT answer Par	t D) · GROUP (Do NC	)T answer Part C)				
PART C: WHAT TYPE OF EVENT I	S IT? * Check all that apply.	PART D: WHAT TYPE OF GR	OUP IS IT? *			
Advocacy for Social Inclusion		Community group or association				
Cultural Diversity Celebration		□ For-profit business				
Fundraising Event		□ Government agency				
Mental Health Awareness Ev	ant	Nonprofit or charitable	e organisation			
		Religious or faith-base	d			
Sports and Recreation Progra	am	organisation Social enterprise				
Youth Mentoring Program						
Other (please specify):						

**4. REASONS FOR NOMINATION** \* *Please attach additional information if required.* 

**5. HOW HAS THE NOMINEE DEMONSTRATED ACTIVE CITIZENSHIP AND ENHANCEMENT OF COMMUNITY LIFE?** \* *Please attach additional information if required.* 

#### 6. HOW HAS THE NOMINEE'S CONTRIBUTION BEEN RECOGNISED ELSEWHERE?

Please attach additional information if required.

# 7. IN WHICH FIELD/SECTOR(S) HAS THE NOMINEE MADE THE MOST SIGNIFICANT CONTRIBUTIONS? \*

Check all that apply

леск	all that apply.				
	Arts and Culture	🗆 Finan	cial support and services		Multicultural interests
	Business and entrepreneurship	Gove	rnment and public service		Sports and recreation
	Education and academia	🗆 Healt	hcare		Youth engagement and development
	Emergency services	🗆 Indige	enous affairs and reconciliation		Other (please specify below)
	Environmentalism and conservation	🗆 Ment	al Health		
8. H	OW DID YOU HEAR ABOUT TH	AWARDS?	* Check all that apply.		
	www.citizenshipawards.com.au	🗆 9Ne	ws Perth social media		Radio commercial
	Auspire Facebook	🗆 9ne	ws.com.au/WesternAustralia		WAToday
	Auspire Instagram	🗆 nine	e.com.au		Previous nominator
	Local council social media	□ ww	w.6pr.com.au		Previous award recipient
	Local council website	🗆 TV d	commercial		Other (please specify below)
9. N	OMINATOR (Your details)			_	
GIVE	IN NAME*	FAMILY NAM	E*		
PHONE		EMAIL*	·		

## **10. REFEREE/ALTERNATE PERSON**

Please include anyone that may be able provide additional information to support this nomination. Provide a name along with a contact email or number.

Referee 1 (name and email/number)

Referee 2 (name and email/number)

I agree to give permission to The Australia Day Council of Western Australia to submit this nomination to other recognition programs such as the Australian of the Year Awards.

## Submit your nomination to your local council by 31 October 2023

Presented by:



Principal Partner:

Government of Western Australia Department of Communities



Media Partners:

NFWS

