

HONORARY FREEMAN NOMINATION FORM

If you have any questions or difficulties in filling in this form, please contact Democratic Services on (01803 207025) or email democratic.services@torbay.gov.uk.

NOMINEE

Please clearly print or type the following details about the person you are nominating. You must ensure that all sections of this form are completed or we will be unable to consider your nominee.

Surname:

Forenames:..... Title:

Address:

.....

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Telephone no:

Mobile:.....

THE RECOMMENDATION

In this section please set out details of how the nominee has made a significant contribution in their area of activity whether it is in the public, private or voluntary sector. It is important that you give as much detail as possible about what your nominee has achieved which makes them stand out against others.

In what role(s) or area(s) has the nominee excelled?

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How has the nominee demonstrated service worthy of recognition?

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How has the nominee's contribution impacted on a particular field, locality, group or the community at large?

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Over what period of time has the nominee made a major commitment?

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What makes this person stand out from others doing similar work?

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BACKGROUND

Please provide full details of POST(S) HELD by your nominee, paid or voluntary, which support and are relevant to your nomination. Please give start and end dates (if known), or whether the person is still involved in this area of activity.

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You may use additional sheets of paper, but please ensure that you state to which section the additional information you are providing relates. Please do not send in examples of the nominee's work (eg. videos, photographs, books) as we cannot take responsibility for their safekeeping.

LETTERS OF SUPPORT

One letter of support may be submitted but it is important that confidentiality is maintained and details of the nomination must not be discussed with any other persons or with the individual concerned.

DETAILS OF PERSON MAKING THE NOMINATION

Please provide your details.

Surname:

Forename: Title:

Address:
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Telephone no:

Mobile:

E-mail:

Relationship to nominee:

Signature:

Date:

Confidentiality: it is imperative that your submission is not discussed with any other persons (except the one person who may provide a letter in support of your application) or with the individual concerned. Any disclosure will make this application invalid.

Please send this form and any enclosures (marked confidential) to:

**The Chairman of Torbay Council
c/o Chairman and Member Support Officer
Democratic Services
Town Hall
Castle Circus
Torquay
TQ1 3DR
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