Young PERSON’S Serving the Community Award 2020/2021

**Application for Award**

**The Nomination:**

• The upper age limit for nominations is 25 years.

• The award is not for any academic work.

• The service must benefit the community of Hedge End.

• This must be unpaid service.

**Further guidance:**

• Voluntary Service for a national organization will be considered if it is unpaid and benefits the Community of Hedge End.

• Voluntary Service for a religious organization will be considered if it is unpaid and benefits the Community of Hedge End.

• No serving Hedge End Town Councilors can be nominated.

• Serving Hedge End Town Councilors can make nominations, except for members of the Recreation & Amenities.

• Nominations from previously unsuccessful applicants will be considered.

**Decision Process:**

• All nominations will be discussed at the first available Committee meeting following the award closing date.

• Applications will be discussed in exempt business.

• Any decision made by Hedge End Town Council is final.

Information in this application form will not be shared with third parties or individuals outside of the Hedge End Town Council. We will keep your details on our secure system and will contact you by email or telephone only in relation to this award.

If the nomination does not have direct contact details, please provide guardians where relevant.

**Nomination Details**

|  |  |
| --- | --- |
| Full Name of Nomination |  |
| Email Address |  |
| Telephone Number |  |
| Address |  |
| Is the Nominee above 18 years of age? |  |

Please share what service the nominee has demonstrated, and the impact this contribution has had on the community of Hedge End? (250 words- 500 max)

**Your Details**

Please share your details.

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|  |  |
| --- | --- |
| Your Full Name |  |
| Email Address |  |
| Telephone Number |  |
| Address |  |

**Reference**

Please provide one reference to support this application for Young Person’s Serving the Community Award. The reference must not be a relative of the individual. 

|  |  |
| --- | --- |
| Reference Full Name |  |
| Email Address |  |
| Telephone Number |  |

Please share a little information which endorses the nominee’s contribution. As well as your relationship to the nominee. (250 words max)

**Complete**

Please return your form to Town Council Offices or email as attachment to: [officemanager@hedgeend-tc.gov.uk](mailto:officemanager@hedgeend-tc.gov.uk)

**Hedge End Town Council Office Address:**

2000 Centre

St. Johns Road  
Hedge End

Southampton

SO30 4AF

Tel: **+44(0)1489 780440**