



Royal Humane Society of New South Wales Inc.

NOMINATION FOR AWARD FORM

Please complete this form, including the Statutory Declaration and forward it by post to Royal Humane Society of New South Wales Inc, PO Box A830 Sydney South NSW 1235.

The Statutory Declaration at the end of this form must be completed by the person making the nomination(s).

Only one form is to be provided for all nominees involved in an incident.

Please note that nomination(s) must be made within 5 years of the incident.

The nominee(s)

With regard to each person nominated please provide:

1. Full name and address	
2. Age and occupation (if known).	
3. Telephone numbers (if known).	
4. Whether the person has been nominated for any other awards of which you are aware.	
5. Any other relevant information about the nominee.	



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Person(s) rescued or attempted to be rescued

With regard to each person rescued or attempted to be rescued please provide:

1. Full name and address.	
2. Age (if known).	
3. Telephone numbers (if known).	
4. Any other relevant information about the person.	



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Incident giving rise to nomination

1. Date, time and place of incident.	
2. If relevant, weather and other prevailing conditions.	
3. Were you present when the incident occurred? If not please indicate the source of your knowledge about it.	
4. Describe the facts of the rescue in chronological order and what action each nominee(s) took including the degree of risk involved.	



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<p>5. Details of any emergency services in attendance (e.g. police, ambulance, fire).</p>	
<p>6. If you are aware of any court proceedings arising out of the incident e.g. inquest, criminal charge please provide details.</p>	
<p>7. Result of rescue attempt.</p>	



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Supporting documents

Please furnish an itemised list of all documents provided in support of the nomination(s).

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Particulars of person nominating

1. Full name and address.	
2. Occupation.	
3. Daytime telephone number and mobile number	
4. Email address.	
5. Relationship to any persons nominated.	

Date of completion of nomination form

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Signature of person nominating

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Statutory Declaration
OATHS ACT 1900, NSW, EIGHTH SCHEDULE

I,, do solemnly and sincerely declare that
[name of declarant]

1. The facts and circumstances referred to in my Nomination for Award dated
are to the best of my knowledge true and correct.
.....
.....
.....

and I make this solemn declaration conscientiously believing the same to be true, and by virtue of the provisions of the
Oaths Act 1900.

Declared at: on
[place] *[date]*

.....
[signature of declarant]

in the presence of an authorised witness, who states:

I,, a,
[name of authorised witness] *[qualification of authorised witness- Justice of the Peace, notary
public or legal practitioner]*

certify the following matters concerning the making of this statutory declaration by the person who made it: *[* please
cross out any text that does not apply]*

- 1. *I saw the face of the person OR *I did not see the face of the person because the person was wearing a face covering, but I am satisfied that the person had a special justification for not removing the covering, and
- 2. *I have known the person for at least 12 months OR *I have confirmed the person's identity using an identification document and the document I relied on was

[describe identification document relied on]

.....
[signature of authorised witness]