**WAGGGS Medal of Service Nomination Form**

**(STAFF)**

|  |  |
| --- | --- |
| Name of nominee |  |
| Their Member Organisation (if applicable)[[1]](#footnote-1) |  |
| Their current appointment (if held) in Member Organisation / WAGGGS  |  |
| Their previous appointments (if relevant) in Member Organisation / WAGGGS |  |
| Contributions as a paid member of staff *(max 500 words)**Please explain how your nominee’s contribution is exceptional, noteworthy and/or extraordinary in nature, and deemed to be over and above what could normally be expected of an individual fulfilling that particular job/role*  |  |
| Reason for nomination (*max 500 words)**Please explain how your nominee has made an exceptional contribution in terms of time, expertise, talents, resources and/or influence to enable WAGGGS to achieve its Mission and/or Objectives.* |  |

**Personal details of the person making the recommendation:**

|  |  |
| --- | --- |
| Name  |  |
| Name of Member Organisation / Regional / WAGGGS Global Team  |  |
| Role |  |
| Signature |  |
| Date |  |

**This completed form should be sent to** **awards@wagggs.org** **by 30 April 2025.**

1. *Nominees are not required to be members of a Member Organisation of WAGGGS* [↑](#footnote-ref-1)