RNH Form No: MANFM.220 – Life Governor Nomination & Award Protocol

 Award of Life Governor Nomination Form

*Please complete this form and return it to Executive Assistant at Rural Northwest Health PO Box 386 Warracknabeal 3393* *or email to* *carolyn.conners@rnh.net.au* *by September 6, 2024 .*

Nominee: Name: Address: Telephone: Does the Nominee know that you have nominated them for the award? Yes / No

Current involvement in Health Service activities *(paid and or voluntary please include as much detail as possible).*

1.

2.

3.

Previous involvement in Health Service activities *(paid and or voluntary please include as much detail as possible)*

1.

2.

3. Other information in support of nomination

*The Nomination must address the key objective of the Life Governor award, which is to recognise exceptional voluntary, philanthropic and/or professional commitment an individual has made to Rural Northwest Health.*

Nominated by: Contact Details:

Position/Relationship to Nominee: Seconded by: Contact Details:

Position/Relationship to Nominee: \_

***Rural Northwest Health to complete the following***

Date Nominated received:

Does the nomination meet the Life Governor criteria? Yes / No Recommendation to appoint a Life Governor. Yes / No

Approved by Board of Directors at October BOD meeting. Yes / No

Authorised By: CEO, Issue No: 1, Issue Date: 23 September 2020 1of 1