





## 2007 Nomination Form – John Wishart Medal

The Committee of the \_\_\_\_\_ Club  
wish to endorse the nomination of \_\_\_\_\_  
as a candidate for the John Wishart Memorial Medal for 2007.

### Candidates History

Address \_\_\_\_\_  
\_\_\_\_\_

Phone: AH \_\_\_\_\_ BH. \_\_\_\_\_ Mob \_\_\_\_\_

Email \_\_\_\_\_

Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_ Age: \_\_\_\_\_

Membership Category \_\_\_\_\_

Current LSV Awards held:

Award	Date Gained	Award	Date Gained
_____	_____	_____	_____
_____	_____	_____	_____

Hours Patrolling \_\_\_\_\_ Hours Rostered (Patrol) \_\_\_\_\_

Hours Instructing \_\_\_\_\_ Awards Instructed \_\_\_\_\_

Hours Examining \_\_\_\_\_ Awards Examined \_\_\_\_\_

Hours as a Competition Official \_\_\_\_\_ Position/Discipline \_\_\_\_\_

Hours as a Coach \_\_\_\_\_ Discipline \_\_\_\_\_

SLSA Competition Officials Accreditation Level \_\_\_\_\_

SLSA Coaching Accreditation Level \_\_\_\_\_

Discipline(s): \_\_\_\_\_

Community Awards/Certificates held:

Award	Year Gained	Award	Year Gained
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Club Positions held:  
(include committee/panels etc)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

State Positions held:  
(include committee/panels etc)

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\_\_\_\_\_

\_\_\_\_\_

Rescues performed during 2007 or details of personal involvement:

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Major Achievements as a lifesaver in 2007

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Report on behaviour and presentation

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Competition performances for 2007

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LSV and other community services

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**Future lifesaving ambitions**

Personal level

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Club level

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State level \_\_\_\_\_

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\_\_\_\_\_

Australian level \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**IMPORTANT DATES**

- **Friday 8 February 2008** - Closing date for nominations
- **Thursday 21 February 2008** – Interviews conducted by the LSV Honours and Awards Committee

**LATE NOMINATIONS WILL NOT BE ACCEPTED**

**Please Note:** This form must be completed in full, signed by the Club President and have supporting documents attached.

**Club Endorsement**

Club name _____	President's name, contact number and signature	_____ Name _____ Contact Number _____ Signature	Date _____
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**Branch Endorsement**

Branch name _____	Name, position and Signature of club contact	_____ Name _____ Position _____ Signature	Date _____
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**State Endorsement**

State name _____	Name, position and Signature of club contact	_____ Name _____ Position _____ Signature	Date _____
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