



DISTINGUISHED SERVICE AWARD – CONFIDENTIAL NOMINATION FORM

Date	<input type="text"/>			
Nominee Full Name	Family name	<input type="text"/>	Given name / s	<input type="text"/>
DeMolay Chapter	<input type="text"/>			
Date of Birth	<input type="text"/>	Age (Years / Months)	<input type="text"/>	
Length of Service	<input type="text"/>	Advisory Council Member of	<input type="text"/>	
General Reputation	<input type="text"/>			
Nominated Previously? / Give Details	<input type="text"/>			
Residential Address	<input type="text"/>			
	<i>City / Town / Suburb</i>	<i>State</i>	<i>Postcode</i>	
	<input type="text"/>	<input type="text"/>	<input type="text"/>	
Postal Address	<input type="text"/>			
	<i>City / Town / Suburb</i>	<i>State</i>	<i>Postcode</i>	
	<input type="text"/>	<input type="text"/>	<input type="text"/>	
Home Phone	<input type="text"/>	Mobile	<input type="text"/>	
Email Address	<input type="text"/>			
Employer	<input type="text"/>	Occupation	<input type="text"/>	
Other DeMolay Honours / Awards, Chapter Offices Held, Memberships / Interests	<input type="text"/>			
Date of Advisory Council / Chapter Meeting Approving Nomination	<input type="text"/>			
Members Present at above Advisory Council / Chapter Meeting	<input type="text"/>			

COMMENTS SUPPORTING NOMINATION

Qualifying Criteria

The Supreme Council, may upon application by an Advisory Council, Chapter or member of the Supreme Council, grant to any senior DeMolay or Advisor the "Distinguished Service Award" for outstanding and long-standing service to DeMolay or a subordinate Chapter for a period of not less than five (5) continuous years.

Comprehensive Supporting Comments

(attach separate sheet if required)

This Nomination is submitted, supported and recommended by the above Advisory Council / Chapter or the Supreme Council Member named below.

**Advisory Council Chairman /
Chapter Scribe /
Supreme Council Member**

Full name:

Contact phone number:

Submit to:

Executive Director
DeMolay Australia Ltd
coy-sec@demolay.org.au