



NOMINATION FORM

Awards Committee:

*Cathaoirleach Cllr. Rosaleen O'Grady ~ Cllr. Declan Bree ~ Cllr. Hubert Keaney ~
Cllr. Seamus Kilgannon ~ Cllr. Gino O'Boyle ~ Cllr. Sean MacManus ~ Cllr. Dara Mulvey*

Please read the conditions of the Awards Scheme before completing the application form

PROFILE OF NOMINATED INDIVIDUAL / GROUP

NAME: _____

ADDRESS: _____

TELEPHONE NUMBER: _____

CATEGORY

(Please tick which category applies)

- ARTS AND CULTURE
- YOUNG ENTERPRISE
- ENVIRONMENT / HERITAGE
- COMMUNITY (INDIVIDUAL)
- COMMUNITY (GROUPS)
- SPIRIT OF SLIGO AWARD
- SPORTS
- SCHOOLS
(group/class nominations)

Please outline your reasons for nominating the person or group on Page 2. If the space provided is insufficient, please attach further information/documentation.

PROFILE OF NOMINATING PERSON / GROUP

NAME: _____

ADDRESS: _____

TELEPHONE NUMBER: _____

SIGNATURE: _____

DATE: _____

**PLEASE RETURN COMPLETED APPLICATION FORMS TO THE CORPORATE SERVICES OFFICE,
SLIGO COUNTY COUNCIL, COUNTY HALL, RIVERSIDE, SLIGO TO BE RECEIVED BY
WEDNESDAY 2ND DECEMBER 2015.**

This form is also available in Irish

