 ***Comhairle Contae an Chabháin***

***Cavan County Council***

***The Cathaoirleach’s Annual Award Scheme 2019***

*(for exceptional achievement, effort or service in a voluntary or unpaid capacity in County Cavan)*

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**APPLICATION FORM**

**Nominator:**

 **Full Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 **Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 **Telephone No. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**I am an Elected Representative** Yes □ No □

I wish to nominate the following person/organisation for the **Cathaoirleach’s Annual Award Scheme-**

 **Full Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 **Organisation: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 **Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 **Telephone No. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Have you obtained permission of the nominee for this nomination Yes □ No □ (permission must have been obtained in order for the person to go forward)

**Category:** (**Please tick only one)**

 **Youth (**aged 25 or under)  **□**

**Social Inclusion □**

**Arts/Culture/Heritage □**

 **Community □**

 **Sports □**

 **Active Age (**aged 65 over) □

(Please be advised that it is important to give as much information as possible about the person you nominate in order to assist the Awards Evaluation Committee to make their decision – incomplete application forms will not assist the committee)

**Please give details of the nominee’s activities and their achievements and contribution to the organisation or community group**

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**Please give details of the reasons why the nominee deserves the Award:**

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**Is there any further information you wish to add to support the application**

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Please return completed Nomination Forms to John Donohoe, *Community & Enterprise Section, Cavan County Council, Farnham Centre, Farnham Street*, Cavan **by 5.00 p.m. on Friday, 29th March 2019.**