

# Volunteer Recognition Awards 2025 Nomination Form: Young Volunteer

## Form Preview

### Details of Nominee - Nominator - Referee

\* indicates a required field

#### Young Volunteer (12-25yrs)

**The City of Ryde's Volunteer Recognition Awards** aim to acknowledge those less visible in our City who have, through their creativity, initiative, personal time or attainments, made a positive contribution to enhancing and uplifting the lives of others within the City of Ryde community.

**The City of Ryde Community Heroes Category** aims to acknowledge those that have contributed above and beyond to the Ryde community. These heroes may have contributed in the past or present. **Please note** - Nominations can be received for those that are no longer with us, however are still worth of recognition for the contributions they made to the Ryde community. Individuals can be nominated in both Young Volunteer and Community Hero categories. There will not be one winner in the Community Hero category, instead, there will be a selection of nominees who will be acknowledged.

**COMMUNITY HEROES AWARD** If you would like the Nominee to be included in the Community Heroes Award, please tick the box. \*

☐ YES

☐ NO

Note: If you would like to nominate an individual only for the Community Heroes Award, please email [community@ryde.nsw.gov.au](mailto:community@ryde.nsw.gov.au)

### Conditions of Entry

**Have you read and accept the Conditions of Entry? \***

☐ Yes ☐ No

<https://www.ryde.nsw.gov.au/Events/Volunteer-Recognition-Awards/Conditions-of-Entry>

### Nominee

(the person being nominated; if group nomination, please list key contact person)

**How does the Nominee identify themselves? \***

☐ Male ☐ Female ☐ Non-binary ☐ Prefer not to answer ☐ N/A (group nomination) ☐ Other (please specify) \_\_\_\_\_

**Name of Nominee \***

First Name

Last Name

**Group (if group nomination)**

**Address \***

**Mobile \***

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## Form Preview

**Home Phone**

**Email \***

Must be an email address.

**Nominee's Date of birth**

\*

Must be a date.

**Is the Nominee aware of the nomination? \***

☐ YES ☐ NO

No more than 1 choice may be selected.

**Does the Nominee perform the majority of their volunteering within the City of Ryde LGA? \***

☐ YES ☐ NO

No more than 1 choice may be selected.

**Nominator (the person nominating)**

\*

☐ I/We wish to nominate the above named for a Volunteer Recognition Award and/or Community Heroes award.

☐ I/We have read the eligibility criteria and agree to be bound by the conditions of entry.

☐ To the best of my/our knowledge, all details are true and correct.

**Name \***

**Title and Organisation (if applicable) \***

**Address \***

**Mobile \***

**Home Phone \***

**Email \***

**Your association to the Nominee \***

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**Signature \***

**Date \***

**Referee**

(Nominations can be submitted by any individual, group or organisation, however, all nominations must be additionally supported by a Referee where possible from the Nominee's volunteering organisation or community group. The Referee must be different from the Nominator)

**Name \***

**Title and Organisation (if applicable)**

**Contact number \***

**Email \***

Must be an email address.

**Association to nominee \***

## Volunteering Details

\* indicates a required field

**Volunteering Details**

**Name of organisation/s for which the Nominee has volunteered/volunteers and what has been their role at these organisations? (including any outstanding work and/or achievements) \***

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**How long has the Nominee volunteered with this organisation/s? \***

**What is the Nominee's time commitment to this organisation/s? \***

Please be as specific as possible.

## Nominee's Volunteer/Community Work

\* indicates a required field

### Details About the Nominee's Volunteer/Community Work

**Describe the benefit to the community \***

Word count:

Must be no more than 500 words.

**Has the Nominee overcome any obstacles in order to participate in volunteer/community work? (such as disability, time constraints, English as a second language, distance travelled) \***

## Declaration

\* indicates a required field

### Declaration

**I have read and accepted the conditions of entry. The information contained in the nomination is, to my knowledge, true and accurate.**

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To view the Conditions of Entry, go to [www.ryde.nsw.gov.au/Events/Volunteer-Recognition-Awards/Conditions-of-Entry](http://www.ryde.nsw.gov.au/Events/Volunteer-Recognition-Awards/Conditions-of-Entry)

**Signature \***

**Date \***

Must be a date.

**Please attach copies of any supporting documents if necessary.**

Attach a file:

For further information contact the City of Ryde on (02) 9952 8222 email:

[community@ryde.nsw.gov.au](mailto:community@ryde.nsw.gov.au) or go to <https://www.ryde.nsw.gov.au/Events/Volunteer-Recognition-Awards>