

CGVC Volunteer Award 2027



Nominee (the person being nominated for the award)

First Name: _____ Last Name: _____

Phone: _____ Email: _____

Address (If you do not know the address, please simply include the City, state and postcode so we can qualify the nomination is in the Clare & Gilbert Valleys Local Government area)

Address Line 1: _____

Address Line 2: _____

Town: _____ State: _____ Postcode: _____

**Reason for nomination – how has the person contributed to the community?
(please attach additional information if required)**

[illegible]

Has the nominee's contribution been recognised elsewhere? (ie Australia Day award)

No ☐

Yes ☐

If yes, please provide details: _____

Referees (please provide contact details for 2 referees or attach 2 written references)

Name: _____ Email: _____

Name: _____ Email: _____

Nominator (your details)

First Name: _____ Last Name: _____

Phone: _____ Email: _____

Address Line 1: _____

Address Line 2: _____

Town: _____ State: _____ Postcode: _____

I give permission for Clare & Gilbert Valleys Council to submit this nomination to the South Australian Volunteer Awards

Yes ☐

Please return completed form to admin@cgvc.sa.gov.au or 4 Gleeson Street, Clare by Friday 20 November 2026.

Thank you for taking the time to complete this nomination.