**Community Council   
Long Service Award Application Form**

|  |  |  |  |
| --- | --- | --- | --- |
| I confirm that: | | | |
| **Title** |  | **Name** |  |
|  | |  |  |
| **Address**  **(including postcode)** |  | | |
|  | | |
|  | | |
|  | | |
|  |  | | |
| **Telephone Number** |  | | |
|  | | | |
| has served as member of the Community Council noted below **for a period of not less than 20 years** and hereby request the presentation of a Long Service Award | | | |
| **Community Council Name** |  | | |
| **Period of service (if known)** |  | | |

|  |  |  |  |
| --- | --- | --- | --- |
| **Signed on behalf of Community Council** |  | | **Position**  **Chairperson / Secretary\***  *\* delete as applicable* |
| **Date** |  |

Please return this form to your local Area Committee Officer