



# Nomination: for a Guide event overseas

PLEASE AFFIX  
PASSPORT-SIZED  
PHOTOGRAPH  
HERE

COMPLETE IN BALL-POINT PEN IN BLOCK CAPITALS. DELETE STARRED \*ITEMS AS APPROPRIATE.

INFORMATION GIVEN ON THIS FORM WILL BE TREATED IN CONFIDENCE.

Surname \_\_\_\_\_

First names \_\_\_\_\_

Address \_\_\_\_\_

Post code \_\_\_\_\_

E-mail \_\_\_\_\_

Date of birth \_\_\_\_\_ Nationality \_\_\_\_\_

Section in Guiding: \*Brownie/Guide/Senior Section/Leader \_\_\_\_\_

Unit \_\_\_\_\_

County \_\_\_\_\_ Country/Region \_\_\_\_\_

Guiding experience \_\_\_\_\_

Interests and qualifications outside school, work and Guiding \_\_\_\_\_

### FOR LEADERS ONLY

Guiding Camp/Holiday experience/qualifications \_\_\_\_\_

Occupation \_\_\_\_\_

Appointment held \_\_\_\_\_

Languages and proficiency \_\_\_\_\_

Overseas travel experience \_\_\_\_\_

\*(privately and/or as a member of the Association) \_\_\_\_\_

Country to be visited _____
Name of event _____
Year _____

Do you suffer from asthma, chest complaint, wheezing or hay fever, migraine, fits or faints, bad period pains, diabetes, nervous disorder or any other illness or disability?  
\*YES/NO If YES, please give details:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please list any dietary requirements and food allergies, eg religious, medical.

\_\_\_\_\_  
\_\_\_\_\_

Note: This information is required for your safety and to ensure that you are not selected for an event which may be unsuitable. Having an illness or disability does not necessarily mean exclusion from any event. However, if selected, you may be required to obtain a current doctor's certificate confirming your fitness to take part.

Signed: \_\_\_\_\_  
Candidate Date

Signed: \_\_\_\_\_  
Parent/guardian (if under 16) Date

Read and approved by:

Signed: \_\_\_\_\_  
\*Guider/Commissioner Date  
\*Guider and/or Commissioner's recommendation to be attached

Signed: \_\_\_\_\_  
\*Camp Adviser (if appropriate) Date

Signed: \_\_\_\_\_  
\*County International Adviser Date

Signed: \_\_\_\_\_  
\*County Commissioner/Deputy Date

Signed: \_\_\_\_\_  
\*Country/Region headquarters Date



# I/N Nomination: for a Guide event overseas

**Form I/N comes in two parts.**

- TOP COPY: white.
- BOTTOM COPY: yellow.

Web site/CD-ROM users

Print two copies of the form to correspond with the number of parts above.

Mark each sheet clearly in the top right corner to show which part it is, eg white or yellow.

Follow the instructions below for using the form,  
remembering to sign each copy of the form.

## **1 The candidate:**

**(if the candidate is under 16 the form should be signed by a parent or guardian)**

- fills in and signs the form.
- keeps the bottom/yellow copy.
- forwards the top/white copy to the Guider (if in a Unit) or Commissioner.

## **2 The Guider or Commissioner:**

- attaches her recommendation.
- signs the form.
- forwards the form to the County Assistant Outdoor Activities Adviser (if appropriate).

## **3 The County Assistant Outdoor Activities Adviser:**

- signs the form.
- forwards the form to the County International Adviser.

## **4 The County International Adviser:**

- signs the form.
- forwards the form to the County Commissioner or Deputy County Commissioner.

## **5 The County Commissioner or Deputy County Commissioner:**

- signs the form.
- forwards the form to the County/Region International Adviser as appropriate.

## **6 The County/Region International Adviser:**

- signs the form.
- forwards the form to CHQ as appropriate.

### **Note:**

depending on where the selection will take place, the form will stop at County level, Country/Region level or CHQ.



## **Girlguiding UK**

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E-mail: [chq@girlguiding.org.uk](mailto:chq@girlguiding.org.uk) Web site: [www.girlguiding.org.uk](http://www.girlguiding.org.uk)

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