

ADF LONG TAN YOUTH LEADERSHIP & TEAMWORK AWARDS

2019 STUDENT SELECTION FORM

APPLICATION PERIOD: 6 JUNE TO 10 August 2019

SCHOOL DEFENCE URN:



DEFENCE FORCE **RECRUITING**

Long Tan
YOUTH
LEADERSHIP
+TEAMWORK
AWARDS



REPLY SLIP (PLEASE PRINT RESPONSES IN BLOCK CAPITALS)

I, the principal or school representative, certify that the selected students are currently enrolled at:

School Name: _____

First Name:

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I hereby give consent for the ADF to release information* to the media regarding our school's participation in the 2019 Long Tan Youth Leadership & Teamwork Awards via the following contact:

First Name:

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Surname:

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Phone:

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Signature: _____

*This information will be issued to media by way of a general media release, identifying the names of participating schools only. Other specific information will not be used without prior consent.

PLEASE RESPOND BY 10 August 2019 LATEST BY FAX/EMAIL OR REPLY PAID MAIL

ADF LONGTAN YOUTH LEADERSHIP & TEAMWORK AWARDS

Reply Paid 235

Ormond, VIC 3204

Fax: (03) 9578 4693

Phone: 1300 651 807

Email: adflongtanawards@dataresponse.com.au

IMPORTANT: Please contact us if you haven't received email confirmation of these nominations by 17 August 2019.

REPLY SLIP (PLEASE PRINT RESPONSES IN BLOCK CAPITALS)

(It is important that full names are clearly written, to ensure names on the certificates and payment letters are correct. Please select 1{one} student per year level.)

YEAR 10 – \$250 and Certificate:

| | | | |
|--------------------|----------------------|------------------------|----------------------|
| First Name: | <input type="text"/> | Middle Initial: | <input type="text"/> |
| Surname: | <input type="text"/> | | |
| Email: | <input type="text"/> | | |

Nominated for: Leadership Teamwork Values Problem Solving
 Resourcefulness Communication Cooperation Community Involvement
 Other (please specify) _____

PERMISSION IS GRANTED TO PUBLISH THIS STUDENT'S NAME ON THE AWARDS WEBSITE HONOUR ROLL YES NO

Are you interested in having the awards presented by a military member[†]?

Year 10 Award Yes No Date ____/____/____

Please indicate a proposed time and location for the presentation.

Time _____
Location _____

YEAR 12 – \$550 and Certificate:

| | | | |
|--------------------|----------------------|------------------------|----------------------|
| First Name: | <input type="text"/> | Middle Initial: | <input type="text"/> |
| Surname: | <input type="text"/> | | |
| Email: | <input type="text"/> | | |

Nominated for: Leadership Teamwork Values Problem Solving
 Resourcefulness Communication Cooperation Community Involvement
 Other (please specify) _____

PERMISSION IS GRANTED TO PUBLISH THIS STUDENT'S NAME ON THE AWARDS WEBSITE HONOUR ROLL YES NO

Are you interested in having the awards presented by a military member[†]?

Year 12 Award Yes No Date ____/____/____

Please indicate a proposed time and location for the presentation.

Time _____
Location _____

[†]While every effort will be made to provide an ADF representative if requested, please understand this may not always be possible due to a number of factors, including geographical location.

