

## **REPUBLIC OF SEYCHELLES**

**NATIONAL AWARDS ACT 2022** 

Nomination Form for the Award of Medal of Honour Nomination Form for the Award of Medal of Merit 2025

For Official Use Only
Received:
Ref:

. This Nomina	ation is for the Award of (tick one box)	) <i>:</i>	
This medal (a) has re and g	dal of Honour is awarded to a person who indered exceptional or outstanding services of nat ratitude of the Government and the people of Sey erformed an outstanding act of bravery, kindness	chelles;	les, earning the respect
This medal	dal of Merit is awarded to a person who has rendered long, loop portance in various fields to the Republic of Seych	-	
. INFORMATI	ON CONCERNING THE NOMINEE		
<b>Title:</b> □ Mr	☐ Mrs ☐ Miss ☐ Dr ☐ Rev [	☐ Prof (tick one bo	x)
Surname:			
Other Name	es:		
National Ide	entity Number:		
Date of Birt	h: (dd/mm/yyyy)		
Nationality:	☐ Seychellois ☐ Non-Seychellois (state which n Tick both boxes in case of dual nationality	ationality)	
Residential .	Address:		
P O Box Nur	mber (if relevant): Te	elephone(s):	
E-mail Addr	ess:		
Profession:			
EMPLOYME	NT HISTORY (Begin with current or most rece	ent post)	
Organisatio	on Post held	From	То

If the nominee is **retired**, please tick this box:  $\Box$ 

ricase s	tate the reasons for recommending this person for this Award. (Continue on as many separate
	is necessary). Staple this form on top with any sheets used.
O BE C	COMPLETED BY THE PERSON MAKING THIS NOMINATION
urnam	e:
Other N	lames:
	al Identity Number:
Nationa	
Nationa Resider	al Identity Number:
Nationa Resider P O Box	al Identity Number:
Resider P O Box E-mail <i>I</i>	Address:  Telephone(s):  that the information stated in this nomination form is correct to the best of my