



Nomination Form

Please fill in the details below to nominate a person/s for the Coastal Bravery Awards. Please include as much information as possible.

PLEASE NOTE: If you are nominating a person or persons in relation to more than one incident, please complete a separate nomination for each incident.

Section 1: Nominator Details

Your details are required as Surf Life Saving Western Australia may need to contact you for further information about your nomination.

Full Name of Nominator:

Contact Number:

Email

Address:

Suburb State: Postcode:

Does the Nominee know that you are nominating them for a Coastal Bravery Award? Please tick:

Yes No

Were you involved in or did you witness the incident? Please tick:

- I was involved in the incident
 I witnessed the incident
 I was not involved in and did not witness the incident

Please turn over for Section 2 - Nominee Details



Nomination Form

Section 2: Nominee Details

If you are nominating a group for their combined efforts in relation to a single incident, please, where possible, list the names of all individuals involved.

Nominee #1

Full Name: Age at time of incident:

Contact #: Email Address (if known):

Address:

Suburb State: Postcode:

In what capacity was the nominee acting during the incident?
Please tick:

Personal
 Emergency Response Volunteer
 Emergency Response Professional

Nominee #2

Full Name: Age at time of incident:

Contact #: Email Address (if known):

Address:

Suburb State: Postcode:

In what capacity was the nominee acting during the incident?
Please tick:

Personal
 Emergency Response Volunteer
 Emergency Response Professional

Section 2 - Nominee Details continues on next page



Nomination Form

Nominee #3

Full Name: Age at time of incident:

Contact #: Email Address (if known):

Address:

Suburb State: Postcode:

- In what capacity was the nominee acting during the incident?
Please tick:
- Personal
 - Emergency Response Volunteer
 - Emergency Response Professional
-

Nominee #4

Full Name: Age at time of incident:

Contact #: Email Address (if known):

Address:

Suburb State: Postcode:

- In what capacity was the nominee acting during the incident?
Please tick:
- Personal
 - Emergency Response Volunteer
 - Emergency Response Professional
-

Section 2 - Nominee Details continues on next page



Nomination Form

Nominee #5

Full Name: Age at time of incident:

Contact #: Email Address (if known):

Address:

Suburb State: Postcode:

In what capacity was the nominee acting during the incident?
Please tick:

- Personal
 Emergency Response Volunteer
 Emergency Response Professional

Nominee #6

Full Name: Age at time of incident:

Contact #: Email Address (if known):

Address:

Suburb State: Postcode:

In what capacity was the nominee acting during the incident?
Please tick:

- Personal
 Emergency Response Volunteer
 Emergency Response Professional

Please turn over for Section 3 - Witness Details



Section 3: Witness Details

To assist us in verifying details of the incident, please provide details of any other witnesses to the best of your ability.

Witness #1

Full Name:

Contact # Email Address
(if known): (if known):

Was the witness involved in the incident? Please tick: Yes No

If yes, please describe how the witness was involved in the incident:

Is the witness aware they may be contacted by SLSWA to verify the incident and make direct comment? Yes No
Please tick:

Witness #2

Full Name:

Contact # Email Address
(if known): (if known):

Was the witness involved in the incident? Please tick: Yes No

If yes, please describe how the witness was involved in the incident:

Is the witness aware they may be contacted by SLSWA to verify the incident and make direct comment? Yes No
Please tick:

Section 3 - Witness Details continues on next page



Nomination Form

Witness #3

Full Name:

Contact # Email Address
(if known): (if known):

Was the witness involved in the incident? Please tick: Yes No

If yes, please describe how the witness was involved in the incident:

Is the witness aware they may be contacted by SLSWA to verify the incident and make direct comment? Please tick: Yes No

Did Emergency Services assist or respond to the incident? Please tick: Yes No Unsure

If yes, please provide details of Emergency Services involvement - ie which service, at which point they arrived etc:

Please turn over for Section 4- Incident Details



Section 4: Incident Details

To assist us in assessing the nomination, please provide as much information about the incident as possible.

Date of Incident:

Location of Incident:

Time of Incident

Please note whether this was AM or PM

What were the conditions at the time of the incident?

Stormy weather
(heavy rain/
lightning/windy)

Other people present

Rip currents

Big waves/swell

Poor visibility

Exposed reef

Strong winds

Rain

Slippery rocks

Extreme heat (40 degrees +)

Please describe any other conditions at the time of the incident

eg temperature, other details about the beach/surroundings

Section 4 - Incident Details continues on next page



Nomination Form

What actions did the nominee/s undertake during the rescue attempt?

Please describe to the best of your ability:

Which elements of the nominee/s actions do you believe displayed bravery?

ie. selflessness, courage, conscious decisions to remain or place oneself in harm's way etc.

Section 4 - Incident Details continues on next page

Do you have any additional information or comments that may assist us with assessing the nomination?

Do you have any evidence of the incident?
Please tick and attach the relevant documents to your Nomination.

Photos

News Articles

Incident Logs

Other, please specify:

End of Nomination form

Please submit this Nomination, including any supporting documentation to Surf Life Saving WA via the below methods:

Email: events@slswa.com.au with the subject "*Coastal Bravery Awards Nomination*"

Mail: PO Box 700, BALCATTWA WA 6914

In Person: Surf House, 7 Delawney Street, BALCATTWA WA 6021

Nomination FAQ

Key Dates: Nominations for the Coastal Bravery Awards are open year-round, with the closing date for nominations falling around three months prior to the award ceremony date. Please check back on the Coastal Bravery Awards website for updates.

Who can make a nomination?

Anyone can nominate a person(s) for a Coastal Bravery Award by completing the online or downloadable Nomination Form.

For example candidates can be identified and nominated by;

- Members of the public
- Surf Life Saving WA (SLSWA)
- Surf Life Saving Clubs
- Coastal organisations

Can I self nominate?

No self-nomination is allowed.

Who can be nominated?

Anyone can be nominated that meets the following basic criteria:

Common Criteria

The Recipient must have endeavoured to save the life of another and their Act must have demonstrated bravery. In this context bravery can be defined as the selfless choice and willingness to confront danger and uncertainty for the benefit of another.

The Act must have occurred on the West Australian coast (including water and beach based acts)*
The Act must have occurred in the past 3 years (includes all acts committed after 1 May 2017). The Act must not have previously been nominated for or received a Coastal Bravery Award

Do I have to choose an award category to nominate for?

The nominator is not required to determine the award category. A common nomination form must be completed and the appropriate award category will be determined by the Coastal Bravery Awards Selection Committee.

As a nominator, do I have to provide contact details?

As all nominations must be verifiable, the nominator must be contactable (if required) to assist SLSWA with the completion of the verification process.

All nominations are treated as strictly confidentiality and will be used only for the purposes of nomination consideration and recipient selection.

How are nominations assessed and recipients determined?

A three-part process is conducted to determine Award Recipients:

1. All nominations will be verified by SLSWA

2. Nominations will then be assessed by the Coastal Bravery Awards Selection Committee. The Committee is an independent advisory committee formed to consider nominations and make recommendations to the President of SLSWA on Award Recipients and Award Level. The Committee consists of:

Secretary

SLSWA Member Development Officer

Members

- Industry Representative - Chief Executive Officer, Surfing WA, Mark Lane
- Industry Representative - Assistant Commissioner Future Capability, Department of Fire & Emergency Services, Jon Broomhall AFSM
- SLSWA General Manager, Lifesaving & Training, Chris Peck

3. The recommendations of the Coastal Bravery Awards Selection Committee will be considered by the President of Surf Life Saving Western Australia for selection.

But I still have questions?

Should you have any further questions about the Coastal Bravery Awards, please contact us at Surf Life Saving WA on (08) 9207 6666 or email us on events@slswa.com.au - we will respond to your query as soon as possible.

How will the Awards be presented?

A formal awards presentation is held in person. Date of this ceremony to be advised.

Contact Surf Life Saving WA
Call us: (08) 9207 6666
Email us: events@slswa.com.au
Visit us: 7 Delawney Street, BALCATTWA WA 6021

