



GOVERNMENT OF THE COMMONWEALTH OF THE BAHAMAS NATIONAL HONOURS AWARD NOMINATION FORM

GUIDANCE ON COMPLETING THE FORM

THE NATIONAL HONOURS AWARDS (NATIONAL HONOURS ACT, 2016)

The National Honours Award recognizes persons who have achieved excellence in designated categories while contributing to national development. There are several levels of National Honours Awards that are conferred on persons by the Governor-General after receiving recommendations from the Advisory Committee for National Honours.

Societies of Honour

1. The Hierarchy of Awards is as follows:

- | | | |
|-----|--|------------|
| (a) | Order of National Hero | OH |
| (b) | Order of the Nation | ON |
| (c) | Order of The Bahamas | OB |
| (d) | Order of Excellence | OE |
| (e) | Order of Distinction | OD |
| (f) | Order of Merit | OM |
| (g) | Order of Lignum Vitae | OLV |
| (h) | Any Honour constituted by the Governor-General | |

2. Distinguished Service Medals in honour of exceptional service by Bahamians serving in

- (a) public service
- (b) military Service
- (c) police, fire and prison services; and
- (d) uniformed services

Public announcements of awards will be made by the Governor-General on 10th July of each year. Conferment of all Awards will take place on the second Monday in October of each year.

WHO CAN NOMINATE A PERSON

Anyone can nominate a person for a National Honours Award but you cannot nominate yourself.

CONFIDENTIALITY

The Advisory Committee for National Honours takes seriously the security of your personal information and that of anyone you nominate. Your information will be held confidentially and accessed only by persons involved in processing the nomination.

A nomination should always be made in confidence and never disclosed to the nominee.

FILLING IN THE FORM

- **A separate form must be completed for each nomination.**
- In filling out a **paper copy** of the form, please **PRINT** using blue or black ink.
- For **online users**, you may complete the form which can be downloaded from www.bahamas.gov.bs "**NATIONAL HONOURS AWARDS FORM (DOCX)**". You may sign the form by appending your electronic signature. You must **Save** your completed form on your device. If you do not have an electronic signature, download the completed form and sign it.

SUBMITTING COMPLETED NOMINATION FORM

- The deadline for all submissions is **29th March, 2024.**
- **Email** your saved Form completed **online** along with any supporting documents as an attachment in **PDF format** to: nationalevents@bahamas.gov.bs
In the Subject line insert: **NOMINATION FORM FOR NATIONAL AWARD FOR** (*name of nominee*).
- Submit completed **paper (hard) copy** of your form, along with any supporting documents, in a sealed envelope to the following addresses: -

National Honours Secretariat
Cabinet Office,
Trade Winds Building,
P. O. Box N-7147,
Nassau, N.P., The Bahamas

OR

Family Island Administrator Office
in Grand Bahama and the Family
Islands



GOVERNMENT OF THE COMMONWEALTH OF THE BAHAMAS

NATIONAL HONOURS AWARD NOMINATION FORM

1a – ABOUT THE NOMINEE			
Title(s) <i>(Mr./Mrs./Ms/Miss Professional/Academic/Religious)</i>		Gender	
First Name			
Middle Name(s)			
Last Name(s)			
Known as <i>(if different from above)</i>			
Place of Birth <i>(Island/Country)</i>			
Date of Birth <i>(dd/mm/yyyy)</i>		Age	
1b - NOMINEE CONTACT DETAILS			
P.O. Box		House/Apt #	
Tel. (Residence)		Street	
Tel. (Mobile)		Settlement/ Subdivision	
Tel. (Business)		City/Island	
Email Address			
1c - NOMINEE EMPLOYMENT DETAILS			
Occupation			
Position			
Employer		Years of Service	
Employment Status	<input type="checkbox"/> Actively Employed <input type="checkbox"/> Retired <input type="checkbox"/> Other <i>(State):</i> _____		
2a - NOMINATION – Area(s) of service to which the Nominee has contributed			
<div style="display: flex; flex-wrap: wrap;"> <div style="width: 50%;"> <input type="checkbox"/> Education <input type="checkbox"/> Health Services <input type="checkbox"/> Agriculture & Fisheries <input type="checkbox"/> Religion <input type="checkbox"/> Sports <input type="checkbox"/> Law Enforcement <input type="checkbox"/> Public Service </div> <div style="width: 50%;"> <input type="checkbox"/> Hospitality Sector <input type="checkbox"/> Community/Social Services <input type="checkbox"/> Youth Development <input type="checkbox"/> Family Island Development <input type="checkbox"/> Arts & Culture <i>(state specific area(s))</i> <input type="checkbox"/> Other <i>(state):</i> _____ </div> </div>			

2c - STATE PREVIOUS NOMINATIONS FOR AN HONOUR/AWARDS (NATIONAL/QUEEN'S OR KING'S HONOURS)

Nominated for:	Date of Nomination	Award Received (State: Yes/No)

3 - ABOUT THE NOMINATOR

Title(s) <i>(Mr./Mrs./Ms/Miss Professional/Academic/Religious)</i>		Gender	
First Name			
Middle Name(s)			
Last Name			
P.O. Box	House/Apt #		
Tel. (Residence)	Street		
Tel. (Mobile)	Settlement/ Subdivision		
Tel. (Business)	City/Island		
Email Address			
Occupation			
Position/Role	Relationship to Nominee		

4 – DECLARATION

I confirm that the information that I have provided in submitting this nomination is, to the best of my knowledge, accurate and complete.

Signature	
Date <i>(dd/mm/yyyy)</i>	

