



RESCUE OF THE MONTH NOMINATION

CLUB/SERVICE			
DATE OF INCIDENT		TIME OF INCIDENT	
NAMES OF LIFESAVER(S)/LIFEGUARD(S)			
LOCATION OF INCIDENT			
SURFGUARD INCIDENT NUMBER (IRD)			
Overview of the incident (limit 1 page)			



PLEASE COMPLETE THE FOLLOWING SECTIONS IN BRIEF BULLET POINT FORMAT

SKILL AND RESOURCES APPLICATION 40%	<i>Were the skills used correctly and appropriately as per SOP's? Did the rescue / incident require advanced technical skills? Was the equipment chosen best for the conditions and skill level of the personnel? Was there optimal use of skills within the available personnel?</i>
PROCEDURES FOLLOWED 30%	<i>Were standard operating procedures followed? Was the safety of the rescuers involved appropriately assessed? Was there appropriate leadership, chain of command, good scene management, paperwork completed, follow-ups etc.? Was the equipment utilised appropriately?</i>
ENVIRONMENTAL CONDITIONS 15%	<i>Was the incident around rocks, cliffs, or other precarious situations? What was the size of the surf, temperature, time, visibility, weather, and other environmental conditions at land or sea?</i>
POTENTIAL OUTCOME 10%	<i>Would the outcome have been the same if the rescuers hadn't intervened?</i>
MEDIA CAPTURE/ COMMUNICATION 5%	<i>Were opportunities maximised in terms of media exposure? If yes, please attach article or give a brief overview of media exposure.</i>



NOMINATION SCHEDULE							
PERIOD	NOMINATION PERIOD ENDS	BRANCH ROM	STATE/TERRITORY ROM		NATIONAL ROM		
		Nominations Close (To Branch or ALS Manager)	Nominations Close (To State)	State Winner Announced	Nominations Close (To SLSA)	Winner Announced	
2013	December	31 December	10 January	17 January	24 January	24 January	31 January
	January	31 January	7 February	14 February	21 February	21 February	28 February
2014	February	28 February	7 March	14 March	21 March	21 March	28 March
	March	31 March	4 April	11 April	17 April	17 April	24 April
	April	30 April	9 May	16 May	23 May	23 May	30 May
	May	31 May	4 June	11 June	18 June	18 June	30 June
	June	30 June	4 July	11 July	18 July	18 July	31 July
	July	31 July	8 August	15 August	22 August	22 August	29 August
	August	31 August	5 September	13 September	20 September	20 September	30 September
	September	30 September	10 October	17 October	24 October	24 October	31 October
	October	31 October	7 November	14 November	21 November	21 November	28 November
	November	30 November	5 December	12 December	19 December	19 December	22 December
	December	31 December	9 January	16 January	23 January	23 January	30 January

ELIGIBILITY

- Rescues, First Aids (or other lifesaving actions) conducted during or outside of patrol hours, year round, on or off the beach.
- All nominees are to be current members of SLSA, employees of Australian Lifeguard Service or a support operation service.
- All Club nominations are to be received by the Branch/Region/State or Territory on or before the applicable closing date.
- No late correspondence will be entered into. Late nominations **will not be eligible** for the State/Territory/National Rescue of the Month, but can be recognised by the Branch or State/Territory independently or nominated to the SLSA Meritorious Awards program if appropriate.
- Branches/Regions may make only one (1) nomination to State centre per period, as per schedule.
- States/Territory may make only one (1) nomination to SLSA per period, as per schedule
- All nominations are to be received on the official 'SLSA Rescue of the Month Nomination Form'. This can be downloaded from the [SLS website](#) or [member portal](#) or obtained by contacting the SLSA or your State/Territory Office
- States/Territory reserves the right to nominate any outstanding rescue/incident in addition to any Branch/Region nomination, inside the designated time period.
- SLSA and the States/Territory reserve the right to promote details of rescues and the nominated rescuer(s) internally and externally in promotion of SLS services/clubs/members and the Rescue of the Month program.
- Nomination for the 'award' serves as agreement to the conditions as stated above.



CLUB SERVICE CHECKLIST – HAVE YOU:	
Completed the nomination form correctly?	
Checked that all nominees are proficient and members on SurfGuard?	
Attached Incident Log or reference incident number from SurfGuard?	
Attached any/all related media clippings?	
Forwarded to your Branch/State by the due date?	

CLUB ENDORSEMENT	
Name of club:	
Name of club representative: Mr / Mrs / Miss / Other	
Club rep. position title:	
Club rep. contact phone no:	Club rep. contact email:
Club rep. signature:	Date:

BRANCH (NSW AND QLD)	
Name of branch:	
Name of branch Rep.: Mr / Mrs / Miss / Other	
Branch rep. position title:	
Branch rep. contact phone no:	Branch rep. contact email:
Branch rep. signature:	Date:

STATE / TERRITORY	
State / Territory:	
Name of state rep: Mr / Mrs / Miss / Other	
State rep. contact phone no:	State rep. contact email:
State rep. signature:	Date:

NATIONAL ENDORSEMENT	
Name of national rep: Mr / Mrs / Miss / Other	
National rep. position title:	
National rep. contact phone no:	Branch rep. contact email:
National rep. signature:	Date: