LISKEARD TOWN COUNCIL

Tel: 01579 559560

E-mail: townclerk@liskeard.gov.uk
Web Site: www.liskeard.gov.uk



Mr S Vinson Town Clerk 3-5 West Street Liskeard PL14 6BW

NOMINATIONS FOR HONOURED BURGESS AWARD

The award of Honoured Burgess is made in recognition of significant service made by an individual to the community over a considerable period of time. Significant service means service above and beyond the call of duty, voluntary service or any other activities which have brought real, long-term benefit to the town or its people.

No rights, duties or privileges are conferred with the title of Honoured Burgess.

The nomination criteria are as follows:

- The nominee must have served the community, performing services which are of benefit to the whole or part of the town or community
- The services are voluntary and not undertaken during paid employment
- The nomination must be made by a registered elector of Liskeard or by Liskeard Town Council member
- The nomination must be investigated by Liskeard Town Council prior to submission to Council for approval
- The nomination must be approved in a meeting of Full Council

There is no limit to the number of nominations which may be made or the number of concurrent holders of the title of Honoured Burgess. However, it is a great honour and is not bestowed frequently or lightly and it is therefore unlikely that there will be more than two or three at any one time.

The Town Council will consider the nomination. A personal or prejudicial interest will bar a Councillor from being present during discussion.

Normal voting rules will apply when the nomination is considered by the Council in Part II of its meeting. The Council's decision is final.

The award of Honoured Burgess will normally be made and presented at the discretion of Liskeard Town Council at the earliest possible opportunity once the honour has been made and accepted.

No posthumous awards will be granted.

The Honoured Burgess will receive a medal and a framed scroll.

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HONOURED BURGESS OF THE TOWN OF LISKEARD

NOMINATION FORM

Name of person nominated:	Address:			
	Phone number			
Name of person making nomination	Address			
	Phone number			
Your relationship to the person nominated ar				
Tour relationship to the person norminated at	id length of time you have known him/her			
Please tell us why you are nominating this person				
Thouse ton de wify you are norminating time person				

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Signed Date

Please return this form to the Town Clerk at the address above. If you would like to include any supporting documents with the application, please do so.