

Active Auxiliarist

**9TH CENTRAL DISTRICT
ACTIVE AUXILIARIST PARTICIPATION
SPRING CONFERENCE
AS OF 31 DECEMBER OF PREVIOUS YEAR**

NOMINATION

<u>DIVISION NO</u>	<u>NAME AUXILIARIST</u>	<u>MEMBER NUMBER</u>
_____	_____	_____
		YEAR

QUALIFICATION EARNED:

YEAR

ACTIVITIES PARTICIPATED IN:

FLOTILLA COMMANDERS SIGNATURE: _____

SIGNATURE DATE

DIVISION CAPTAINS SIGNATURE: _____

SIGNATURE DATE

REQUIREMENTS

- (1) ONE NOMINATION FOR EACH DIVISION
- (2) MEMBER MUST HAVE MORE THAN ONE YEAR AND LESS THAN TWO YEARS IN THE AUXILIARY
- (3) **NOMINATION MUST BE RECEIVED BY DSO-PS BY 31 DECEMBER 2008**