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| **Office use only** |
| Batch no |  |
| Date |  |
| Initials |  |

**Before submitting this form, please ensure:**

1. Each person has met the [Criteria](https://www.johnmuirtrust.org/award-criteria-and-levels) for their John Muir Award
2. Names are spelt correctly
3. You allow at least 2 weeks for us to process Certificates.

**Please email to** **info@johnmuiraward.org** in word document format. (If sending by post please print clearly)

|  |  |  |
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| **Contact Person:** |  | **Address to send Certificates to:** |
| **Contact Phone No:** |  | Name / OrganisationAddress 1Address 2Address 3Postcode |
| **Date Required:** | (dd/mm/yy) |

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| **This information will be printed on Certificates** |
| **Lead Organisation:** |  |
| **1 other organisation:****(if applicable)** |  | **Month & Year Awarded:** | e.g. OCT-20 |

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| **Names of Participants and Leaders achieving Awards, and Award level (Discovery, Explorer, Conserver):** |
| Name | Level(Discovery, Explorer, Conserver) | **Name** | Level(Discovery, Explorer, Conserver) |
| *First name, surname* |  | *First name, surname* |  |
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 **Summary/Breakdown of Awards requested:**

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| --- | --- | --- | --- |
| **Level (Discovery, Explorer, Conserver)** | **Total Number** | **How many participants identify as:** | **Participant age ranges:** |
| **Male** | **Female** | **In another way** | **< 10** | **10-11** | **12-16** | **17-24** | **25+** |
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| --- | --- |
| **Provider Certificate Required?** (1 Certificate per Organisation per calendar year)  | Yes [ ]  No [ ]  |
| **Name of Organisation for Provider Certificate:** |  |

**Please e-mail/post to** **info@johnmuiraward.org****/John Muir Award, 41 Commercial Street, EDINBURGH, EH6 6JD**

By completing this form you are consenting to the data being held by John Muir Trust and partners\* for the production of certificates. To view our Privacy Policy please go to [www.johnmuirtrust.org/privacy-policy](http://www.johnmuirtrust.org/privacy-policy). \*Partners include Cairngorms NPA & Lake District NPA.