

Requirements / Remarks

# The Duke of Edinburgh's International Award-Mauritius Email: dofemauritius@gmail.com

www.mys.govmu.org Tel: 2061555



## **AWARD COMPLETION FORM**

(To be filled by Award Leader in CAPITALS and submit to the Supervisor)



Award Leader Tel (Office)  2. Award Completion Participants	Tel (Mobile)					
2. Award Completion	Tel (Mobile)					
·			Email	Email		
Participants						
F	Bronze	Silver	Gold	Total		
Male						
Female						
Total						
Schedule date for Award Ceremony			1			
Venue of Award Ceremony						
Requirements from Award Office  Form duly filled in and signed sho Participants are qualified as per the	e required Award S					
wo weeks before the Award Cerem	ony.					
Participants at Bronze and Silver Le evel will be required to attend an li This Panel will be set up by the Awa	ndividual Award Ass	sessment Panel	for qualifying for the			
Signature of Award Leader		Signature of	Head of Organisation			
Pate / /		Date /	/	(Seal of Organisation)		

# Name and signature of Officer Date / /



# **AWARD COMPLETION LIST OF PARTICIPANTS**



(To be filled by Award Leader in CAPITALS)

1	A۷	var	d	Ce	nt	re

Award Centre		

### 2. List of Participants (To be filled in CAPITALS as per birth certificate)

SN	Other Name	Surname	Tel
1			
2			
3			
4			
5			
6			
7			
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13			
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19			
20			

Signature of Award Leader

