



ශ්‍රී ලංකා බාලදේශීය සංගමය
இலங்கை சாரணர் சங்கம்
SRI LANKA SCOUT ASSOCIATION

For Office Use:

File No:
Interview Reference No:
Date:

**ජනාධිපති බාලදේශීය ප්‍රදාන සම්මුඛ පරීක්ෂණය
ஜனாதிபதி சாரணர் விருதுக்கான நேர்முகத் தேர்வு
PRESIDENT'S SCOUT AWARD INTERVIEW**

**සම්මුඛ පරීක්ෂණ/ඇගයුම් ප්‍රකාශය
நேர்முகத் தேர்வு/ மதிப்பீட்டு பிரகடனம்
INTERVIEW/ ASSESSMENT DECLARATION**

අපේක්ෂකයින් සඳහා උපදෙස්/පங்கෙற்பාලාග්‍රහණයට අනුමැතිය/Instructions to Candidates

- සම්මුඛ පරීක්ෂණ/ඇගයුම් දිනයට පෙර මෙම අයදුම්පත සම්පූර්ණ කර, අවශ්‍ය සියලුම අත්සන් නිශ්චිතව දක්වා ඇති පරිදි ලබාගෙන ඇති බවට වග බලා ගන්න.
நேர்முகத் தேர்வு இடம்பெறும் தினத்திற்கு முன்னர் இவ் விண்ணப்பப்படிவத்தை பூர்த்தி செய்து, கோரப்பட்டுள்ள அனைத்து கையொப்பங்களும் குறித்துரைக்கப்பட்டுள்ளவாறு முறையே பெறப்பட்டுள்ளதென்பதை உறுதி செய்யவும்.
Please complete this application form prior to the interview/assessment date and ensure that all required signatures are obtained as specified.
- සම්මුඛ පරීක්ෂණ දිනයේ ලියාපදිංචි වන අවස්ථාවේදී සම්පූර්ණ කරන ලද පෝරමය ඉදිරිපත් කරන්න.
நேர்முகத் தேர்வு தினத்தில் பதிவுகளின் போது பூர்த்தி செய்யப்பட்ட படிவத்தை சமர்ப்பிக்கவும்.
Submit the completed form at the time of registration on the day of the interview

A කොටස: බාලදේශීයයාගේ ප්‍රකාශය/பகுதி A: சாரணர் பிரகடனம்/ Part A: Scout's Declaration

- සම්පූර්ණ නම/ முழுப் பெயர்/Full Name:
- උපන් දිනය/ பிறந்த திகதி/Date of Birth:
- ජාතික හැඳුනුම්පත් අංකය/ தேசிய அடையாள அட்டை இலக்கம்/ NIC No.:
- දිස්ත්‍රික්කය/ மாவட்டம்/District:
- බාලදේශීය කණ්ඩායම/சாரணர் குழு/அலகு/ Scout Group:.....
- සම්මුඛ පරීක්ෂණ ගොනු අංකය/ நேர்முகத் தேர்வு கோப்பு இலக்கம்/ Interview File No:.....
- දුරකථන අංකය/ தொடர்பு இலக்கம்/ Contact No:.....
- වට්ස්ඇප් අංකය/ புலனம் இலக்கம்/ WhatsApp No:.....
- ලිපිනය/ தபால் முகவரி/ Postal Address:.....
- විද්‍යුත් තැපෑල ලිපිනය/ மின்னஞ்சல் முகவரி/ Email Address:

4. මගේ දරුවා/හාරකாரின்වයෙහි සිටින තැනැත්තා/තැනැත්තිය අවශ්‍ය ප්‍රමිතියට අනුව ක්‍රියා නොකරන්නේ නම්, සම්මුඛ පරීක්ෂණය කළ දැමීමට හෝ සම්මුඛ පරීක්ෂණය අසමත් වීමට ඉඩ ඇති බව මම පිළිගනිමි. තවද මෙම ප්‍රතිඵලය ඇගයීම් ක්‍රියාවලියේ කොටසක් ලෙස මම පිළිගනිමි.

எனது குழந்தை/இளங்கணர் கோரப்படும் தரநிலைக்கு செயல்படவில்லை எனில், அவரின் தெரிவு ஒத்திவைக்கப்படக்கூடும் அல்லது அவர் தோல்வியடையக்கூடும் என்பதை நான் ஒப்புக்கொள்வதோடு மதிப்பீட்டு செயல்முறையின் ஒரு பகுதியாக இந்த முடிவை நான் ஏற்றுக்கொள்கிறேன்.

I acknowledge that if my child/ward does not perform to the required standard, there is a possibility of deferral or failure, and I accept this outcome as part of the evaluation process.

5. සම්මුඛ පරීක්ෂණ මණ්ඩලයේ අවසාන තීරණය මම පිළිගන්නා බවත්, සම්මුඛ පරීක්ෂණ මණ්ඩලයට එරෙහිව පසුව එල්ල වන වගකීමෙන් ඔවුන්ව නිදහස් කරන බවත් මෙයින් තහවුරු කරමි.

நேர்முகத் தேர்வுக் குழுவின் இறுதி முடிவை நான் ஏற்றுக்கொள்வேன் என்றும் நேர்முகத் தேர்வுக் குழுவிற்கு எதிரான எந்தவொரு உரிமைகோரல்களுக்கும் இழப்பீடு வழங்குகிவேன் என்றும் இத்தால் நான் உறுதிப்படுத்துகிறேன்.

I hereby confirm that I will accept the final decision of the Interview Panel and indemnify the interview panel from any subsequent claims against them

දෙමාපිය/හාරකරුගේ අත්සන/பெற்றோர்/பாதுகாவலர் கையொப்பம்/

Signature of Parent/Guardian:.....

දිනය/ திகதி /Date:.....

දිස්ත්‍රික් කොමසාරිස්වරයාගේ අනුමැතිය

மாவட்ட ஆணையாளரின் அனுமதி

District Commissioner's Endorsement

ඉහත ප්‍රකාශන මම මෙයින් අනුමත කරන අතර, මෙම බාලදක්ෂයා ජනාධිපති බාලදක්ෂ සම්මුඛ පරීක්ෂණය සඳහා සුදුසුකම් ලබා ඇති බවත් සුදානම් බවත් තහවුරු කරමි.

மேற்படி பிரகடனத்தை இத்தால் நான் ஏற்றுக்கொள்வதோடு, குறித்த சாரணர் ஜனாதிபதி சாரணர் விருதுக்கான நேர்முகத் தேர்வுக்கு தகுதியானவர் மற்றும் தயாராக உள்ளார் என்பதை உறுதி செய்கிறேன்.

I hereby endorse the above declarations and confirm that the Scout is eligible and prepared for the President's Scout Interview.

දිසා කොමසාරිස්වරයාගේ නම/மாகாண ஆணையாளரின் பெயர்/Name of District Commissioner:

අත්සන/கையொப்பம்/Signature:

දිනය/திகதி/Date:.....

නිල මුද්‍රාව/அதிகாரபூர்வ முத்திரை/Official Seal/Frank:

For Office use only		Photograph <i>(Colour, in Uniform)</i>
File No.	:-	
Certificate No.	:-	
Date Presented.	:-	

(Please complete this application in English, using block letters and blue or black ink)

- Applicant's Signature**

District Commissioner's Signature

Date _____

Scout Membership Badge

- The earliest age to join the Junior Scout Troop is 10 years and 06 months.
- New Scouts should complete Service of 3 months since joining the Troop
- The Cub Scouts who won the Gold / Silver Star can be invested after 2 months since joining the Troop.

I. Winner of the Silver Star	☐ Yes ☐ No	Winner of the Gold Star	☐ Yes ☐ No	Age
II. Date of Joining the Scout Troop	:-	D D M M Y Y Y Y	Y Y M M	
II. Date passed - Scout Membership Badge	:-	D D M M Y Y Y Y	Y Y M M	
IV. Service of period	:-	Y Y M M		

(Proficiency Badges are not required)

Scout Award

- Minimum age to commence -10y 9m, & Minimum age to complete -11y 3m
- Should have at least 6 Months Service after winning the Scout Membership Badge

➤ Proficiency Badges #- 3	<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 30%;">Badge Group</th> <th style="width: 40%;">Name of Badge</th> <th style="width: 30%;">Date Passed</th> </tr> </thead> <tbody> <tr> <td>01. Social Science</td> <td>Happy Home</td> <td style="background-color: #f0f0f0;">DD/ MM /YYYY</td> </tr> <tr> <td>02.</td> <td></td> <td style="background-color: #f0f0f0;">DD/ MM /YYYY</td> </tr> <tr> <td>03.</td> <td></td> <td style="background-color: #f0f0f0;">DD/ MM /YYYY</td> </tr> </tbody> </table>	Badge Group	Name of Badge	Date Passed	01. Social Science	Happy Home	DD/ MM /YYYY	02.		DD/ MM /YYYY	03.		DD/ MM /YYYY	
Badge Group	Name of Badge	Date Passed												
01. Social Science	Happy Home	DD/ MM /YYYY												
02.		DD/ MM /YYYY												
03.		DD/ MM /YYYY												
➤ Happy Home Badge, and 2 other badges selected from any two groups other than from the Camp Craft and Public Service Group														
● Camp Nights (2)	:- { Y Y Y Y M M D D													
● One Day Hike (12 Km) Hike	:- { Y Y Y Y M M D D													
● Date Passed - Scout Award	:- { Y Y Y Y M M D D	Age Y Y M M												
● Date Passed - Scout Membership Badge	:- { Y Y Y Y M M D D	Y Y M M												
● Period of Service (>6 Months)	:- { Y Y M M													

Chief Commissioner's Award

- Minimum age to commence -11y 3m & Minimum age to complete 12y
- Should have at least 9 Months Service after winning the Scout Award

^N.B.- Should select the badges from Junior or Senior sections depending on the age. The Scout could pass a maximum of 3 Proficiency badges during a calendar month. There should be a gap of at least one weeks between any 2 Badges.

From Practical Science/ Camp craft/ Explorer Groups, or Better World Framework, or Seaman Group (Sea Scouts) or Airman Group (Air Scouts)

<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 30%;">Badge Group</th> <th style="width: 40%;">Name of Badge</th> <th style="width: 30%;">Date Passed</th> </tr> </thead> <tbody> <tr> <td>01.Camp Craft</td> <td>First Aider(J) /Ambulance(S)</td> <td style="background-color: #f0f0f0;">DD/ MM /YYYY</td> </tr> <tr> <td>02.Public Service</td> <td>Missioner(J) /Public Health(S)</td> <td style="background-color: #f0f0f0;">DD/ MM /YYYY</td> </tr> <tr> <td>03.</td> <td></td> <td style="background-color: #f0f0f0;">DD/ MM /YYYY</td> </tr> </tbody> </table>	Badge Group	Name of Badge	Date Passed	01.Camp Craft	First Aider(J) /Ambulance(S)	DD/ MM /YYYY	02.Public Service	Missioner(J) /Public Health(S)	DD/ MM /YYYY	03.		DD/ MM /YYYY		
Badge Group	Name of Badge	Date Passed												
01.Camp Craft	First Aider(J) /Ambulance(S)	DD/ MM /YYYY												
02.Public Service	Missioner(J) /Public Health(S)	DD/ MM /YYYY												
03.		DD/ MM /YYYY												
➤ Camp Nights (2)	:- { Y Y Y Y M M D D													
➤ District Commissioner's Hike (22 Km) with 1 camp night	:- { Y Y Y Y M M D D													
➤ District Commissioner's Cord (After completing District Commissioner's Hike)	:- { Y Y Y Y M M D D													
➤ Date passed - Chief Commissioner's Award	:- { Y Y Y Y M M D D	Age Y Y M M												
➤ Date Passed - Scout Award	:- { Y Y Y Y M M D D	Y Y M M												
➤ Period of Service (>9 Months)	:- { Y Y M M													

Applicant's Signature	District Commissioner's Signature	Date
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Chief Commissioner's Challenge Award (Highest Award for the Junior Scouts <14y 6m)

(Optional)

Those who have completed the 22 requirements of the Chief Commissioners Award, and complete the **District Commissioner's Hike** as a Junior Scout (before 14 years and 6 months) are eligible to win the Chief Commissioners **Challenge Award** which is the highest Award for a Junior Scout

➤ Date Passed - District Commissioner's Hike	&-	<table border="1" style="display: inline-table; border-collapse: collapse;"> <tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>M</td><td>M</td></tr> </table> <table border="1" style="display: inline-table; border-collapse: collapse;"> <tr><td>D</td><td>D</td></tr> </table> <table border="1" style="display: inline-table; border-collapse: collapse;"> <tr><td>Y</td><td>Y</td><td>M</td><td>M</td></tr> </table>	Y	Y	Y	Y	M	M	D	D	Y	Y	M	M	Age
Y	Y	Y	Y	M	M										
D	D														
Y	Y	M	M												
➤ Date Passed - Chief Commissioner's Challenge Award	&-	<table border="1" style="display: inline-table; border-collapse: collapse;"> <tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>M</td><td>M</td></tr> </table> <table border="1" style="display: inline-table; border-collapse: collapse;"> <tr><td>D</td><td>D</td></tr> </table> <table border="1" style="display: inline-table; border-collapse: collapse;"> <tr><td>Y</td><td>Y</td><td>M</td><td>M</td></tr> </table>	Y	Y	Y	Y	M	M	D	D	Y	Y	M	M	
Y	Y	Y	Y	M	M										
D	D														
Y	Y	M	M												
➤ Date Passed - Chief Commissioner's Award	&-	<table border="1" style="display: inline-table; border-collapse: collapse;"> <tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>M</td><td>M</td></tr> </table> <table border="1" style="display: inline-table; border-collapse: collapse;"> <tr><td>D</td><td>D</td></tr> </table> <table border="1" style="display: inline-table; border-collapse: collapse;"> <tr><td>Y</td><td>Y</td><td>M</td><td>M</td></tr> </table>	Y	Y	Y	Y	M	M	D	D	Y	Y	M	M	
Y	Y	Y	Y	M	M										
D	D														
Y	Y	M	M												
➤ Period of Service as a Junior Scout/Membership badge	&-	<table border="1" style="display: inline-table; border-collapse: collapse;"> <tr><td>Y</td><td>Y</td><td>M</td><td>M</td></tr> </table>	Y	Y	M	M									
Y	Y	M	M												

Prime Minister's Award

- Minimum age to commence -14y 6m & Maximum age to complete - 18y
 - Should have at least 9 Months service period after achieving the Scout Award
- ^N.B.- Scout should select the badges from Junior or Senior sections depending on the age.
The Scout could pass a maximum of 5 Proficiency Badges during a calendar month.
There should be a gap of at least one week between any 2 Badges.

Education or Culture Group or Senior Sever or Better world Framework (other the Messengers of Peace Awards)

This should be the last badge to complete for Bushman's Thong

Badge Group	Name of Badge (Senior)	Date passed
01.		YYYY/ MM/DD
02. Sports		YYYY/ MM/DD
03. Farmer		YYYY/ MM/DD
04.	Civics	YYYY/ MM/DD
05.	Venturer	YYYY/ MM/DD

- Date of making his/her own Bushman's Thong

&-

Y	Y	Y	Y	M	M	D	D
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Sea Scouts should complete 1 Badge from Seaman Group

Award	Date passed
Bushman's Thong	YYYY/ MM/DD
Seaman/Airman	YYYY/ MM/DD

Air Scout's Should complete 1 Badge from Airman's Group

- Camp Nights (4)

Y	Y	Y	Y	M	M	D	D
Y	Y	Y	Y	M	M	D	D
Y	Y	Y	Y	M	M	D	D
Y	Y	Y	Y	M	M	D	D

- Date/s - Leadership Training Course for Senior Scouts (>15y)

Y	Y	Y	Y	M	M	D	D
Y	Y	Y	Y	M	M	D	D

- Date of Community Service Project (should submit Complete Project Proposal and Report)

&-

Y	Y	Y	Y	M	M	D	D
---	---	---	---	---	---	---	---

- Number of Man hours

&-

--	--

Age

- Venturer Hike with 1 camp night (32 Km)

&-

Y	Y	Y	Y	M	M	D	D
---	---	---	---	---	---	---	---

Y	Y	M	M
---	---	---	---

- Date Passed - Prime Minister's Award

&-

Y	Y	Y	Y	M	M	D	D
---	---	---	---	---	---	---	---

Y	Y	M	M
---	---	---	---

- Date Passed - Chief Commissioner's Award

&-

Y	Y	Y	Y	M	M	D	D
---	---	---	---	---	---	---	---

- Period of Service (>9 Months)

&-

Y	Y	Y	Y	M	M	D	D
---	---	---	---	---	---	---	---

Applicant's Signature

District Commissioner's Signature

Date

President's Scout Award

- Minimum age to commence -15y 6m & Minimum age to complete -16y
- Should have at least 9 Months Service after achieving the Bushman's Thong

Education or Culture Group or Senior Saver or Better world Framework (other than Messengers of Peace Award)

This should be the last badge to complete for Bushman's Thong

Badge Group	Name of Badge (Pass or Re-pass)	Date passed
01.	Senior Happy Home	YYYY/ MM/DD
02.	Ambulance	YYYY/ MM/DD
03.	Quarter Master or Camp Warden	YYYY/ MM/DD
04. Public Service		YYYY/ MM/DD
05.	Senior Organizer	YYYY/ MM/DD

➤ Date of Community Service Project :-

Y	Y	Y	Y	M	M	D	D
---	---	---	---	---	---	---	---

➤ Number of Man hours - Minimum 72 (by 8 to 12 Scouts)

:-

--	--

Age

➤ Camp nights (4) - after completing Bushman's Thong

:-

Y	Y	Y	Y	M	M	D	D
Y	Y	Y	Y	M	M	D	D
Y	Y	Y	Y	M	M	D	D
Y	Y	Y	Y	M	M	D	D

Y	Y	M	M
Y	Y	M	M

➤ Completion Date of Prime Minister's Award :-

:-

Y	Y	Y	Y	M	M	D	D
---	---	---	---	---	---	---	---

➤ Completion Date of President's Scout Award :-

:-

Y	Y	Y	Y	M	M	D	D
---	---	---	---	---	---	---	---

➤ Period of Service (>9 Months)

:-

Y	Y	M	M
---	---	---	---

Declaration

18. Applicant

I(Name), the applicant for the President Scout Award, hereby declare that I have completed all the requirements for the President's Scout Award. I declare that all the information mentioned here is true and correct. I hereby promise that I will do my best to live my life in accordance with the supreme qualities of a President Scout and also to keep the Scout promise

I forward herewith the under-mentioned documents to your kind attention

01. Community Service Project Report (Including Project Proposal)

--

02. Copy of the Birth Certificate, certified by the Principal /Head of the Institution

--

03. Scout Progress Record Book

--

04. Photocopy of NIC

--

Date :-

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

Signature of Scout Applicant

Recommendation

19. Scout Leader

Being the Scout Leader of the Applicant, I certify that Scout.....(Name) has completed all requirements for this President's Scout Award. He/ She has maintained the Log book and the Progress Record Book very well and methodically. The activities done by him/her were evaluated by the Patrol Leaders' Council. Hence, I recommend that he/she is qualified to apply for the President's Scout Award.

Name :-

Date :-

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

Signature and Rubber Stamp

Applicant's Signature

--

District Commissioner's Signature

--

Date

--

Recommendation

20. Group Scout Leader

I certify that the Scout..... (Name), the President's Scout Award (PSA) applicant, has successfully completed all requirements for the President's Scout Award. I also certify that he/she is an active Scout and has performed well.

Name :-
Principal /GSL

Date :-

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

.....
Signature and Rubber
Stamp

Recommendation

21. Hony. Secretary - Group Committee

We recommend that the PSA applicant Senior Scout..... (Name) has been an active Scout. As he/she has completed all requirements, we recommend him/her for the President's Scout Award.

Name :-
Hony. Secretary

Date :-

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

.....
Signature and Rubber
Stamp

Confirmation of Birth Certificate

22. Principal / Sponsoring Authority

I certify that the Date of birth of the Senior Scout (Name) is as per his/her original Birth Certificate. A true copy of his/her birth Certificate is attached herewith.

Name :-
Principal / Sponsoring Authority

Date :-

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

.....
Signature and Rubber
Stamp

Recommendation

23. Hony. Badge Secretary (District Branch)

I, the Badge Secretary of the District, hereby certify that the dates mentioned by the Senior Scoutof Scout Group in this Application and in the Progress Record Book are correct in accordance with the records maintained by me in the District Badge Registration Book.

.....
Name of Badge Secretary

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

Date

.....
Signature and Rubber
Stamp

Applicant's Signature

--

District Commissioner's Signature

--

Date

--

Submission of Application to the District Commissioner

24. Received Date of the Application and Related Documents

(The district branch should place the date stamp here)

:-

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

25. Confirmation by the Members of the District Interview Panel

We hereby confirm that the PSA applicant, Senior Scout..... (Name) of(Scout Group), has successfully completed all the requirements for the President's Scout Award. All relevant documents, including the Progress Record Book and the Community Service Project Report, have been duly submitted and are in order.

01 Name Designation Signature

02 Name Designation Signature

03 Name Designation Signature

26. Date Interviewed

:-

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

27. District Scout Commissioner's Recommendation

I hereby recommend that the PSA Applicant Senior Scout..... (Name) ofScout Group has completed all requirements for the Presidents Scout Award, hence, I recommend him /her for the Award.

.....
District Commissioner

Date

:-

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

.....
Signature &
Rubber Stamp

Verification of National Headquarters

28. Authorized Officer

Date of Application received :-

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

Application Number :-

--

29. Verification

I examined the Application, the Community Service Project Report and the relevant Documents of the PSA applicant..... (Name) ofScout Group.

I confirm that his/ her Application, the Community Service Project Report and the relevant Documents are in order and recommend attending the District Level Assessment Workshop (DAW).

.....
NHQ Commissioner

Date :-

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

.....
Signature

30. Confirmation of the Eligibility at the District Level Assessment Workshop (DAW)

The applicant..... (Name) of..... Scout Group attended the District Level Assessment Workshop (DAW) held on(Date) at(Place) and tested his/ her knowledge and skills practically and recommend that he/she is suitable for the President's Scout Award. We have attached the Final Assessment Sheet and the Progress Report for the consideration of the National Headquarters.

Name of Head of Panel

Date

:-

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

Signature

31. Final Recommendation

Date of Application Received after completing DAW :-

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

I examined the Application, the Final Assessment Sheet and Progress Report of the District Level Assessment Workshop (DAW), Declaration Form and the relevant Documents of the PSA applicant..... (Name) of.....Scout Group. I confirm that he/she has completed all the requirements up the expected standard of Sri Lanka Scout Association and recommend awarding the President's Scout Award.

Asst. Chief Commissioner

Date

:-

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

Signature

32. Approval of Chief Commissioner

I hereby approve the application of Senior Scout..... (Name) for the President's Scout Award.

I extend my congratulations to him/her on successfully completing this prestigious award, recognized as the highest honor a Senior Scout can achieve. I wish him/her continued success in all future endeavors!

Signature

Date :-

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

33. Presentation of Award

➤ Date of Registration

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

➤ Certificate Number

--	--	--	--	--	--	--	--	--	--

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

➤ Date of Award Ceremony

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---