Please provide more information.



## Organisation Request - Saltire Awards Certificates

## Section 1 - Contact Details Name of Organisation Address postcode Telephone Number E-mail Address **Contact Name** Section 2 - Certificate Information Please select which certificate Challenge Approach 10 hours Approach 25 hours Ascent 50 hours you are requesting: Ascent 100 hours Ascent 200 hours Ascent 500 hours ALL THE FOLLOWING INFORMATION WILL BE USED TO PRODUCE THE CERTIFICATE . PLEASE DOUBLE-CHECK SPELLING OF NAMES BEFORE FORWARDING THE FORM. Volunteer's Name Full Organisation(s) Name or Project(s) Name. If the volunteer is with more than one organisation please list all. **Date Started Volunteering Date Completed Hours** Section 3 - Validation Signed I confirm that the above volunteer has completed the required number of hours to obtain their Date 10/25/50/100/200/500\* hour certificate. (\*delete as appropriate) Section 4 – Case Studies Does this volunteer have a story to tell - do you? Please tick the appropriate box if you would like to share your story. Yes, the volunteer is interested. Yes, the organisation is interested.

Please provide more information.