



GOVERNMENT OF BERMUDA  
Ministry of Social Development and Sports

**Department of Community and Cultural Affairs**

**National Naming and Recognition Committee**  
**National Recognition Nomination Form**  
*“Honouring Local Heroes”*

This application is for (please check one only):

- National Hero Nomination     Site Renaming [Select One]

(If applicable) Site for renaming is a (please check one only):

- Building             Road             Park             Bridge

Current Name of Site (if applicable): \_\_\_\_\_

Suggested Name: \_\_\_\_\_

Name of person being to be honoured: \_\_\_\_\_

List significant accomplishments made by this person to Bermuda:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Is the person alive or deceased? \_\_\_\_\_

State reasons why this person should be honoured.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

***At Your Service, Bermuda***

A signed letter from the person or significant surviving family member (spouse, child or relative) indicating their sentiments is required. Please indicate if this document is attached.  Yes  No

Please indicate if any additional support documentation is included and what type:

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Please indicate other persons, interest groups or community groups that you have consulted and where appropriate, attach their feedback.

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### **Nominator Information**

Name (please print): \_\_\_\_\_

Signature: \_\_\_\_\_

Relation to Nominee if any: \_\_\_\_\_

Telephone: (h) \_\_\_\_\_ (w) \_\_\_\_\_ (c) \_\_\_\_\_

Address: \_\_\_\_\_

Email: \_\_\_\_\_

Date of Submission: \_\_\_\_\_

### ***At Your Service, Bermuda***

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