

# 2025 LiFE Awards Nomination Form

## YOUR DETAILS

First Name:

Surname:

Organisation (if applicable):

Role (if applicable):

Email:

Phone:

## NOMINATED PERSON/PROJECT DETAILS

First Name:

Surname:

Organisation (if applicable):

Role (if applicable):

Project/Service nominated:

Email:

Phone:

City/town:  State:

Category:

Has the nominee previously won a life award? Yes  No  If yes, which year?

### 1. Initiative Summary (max. 100 words)

Briefly describe the initiative and explain why it should be recognised. The initiative can be a project, service, or an individual's effort.



**2. Background on Initiative (max. 250 words)**

Explain the purpose or motivation behind the initiative. Was it inspired by a new idea, or a unique approach tailored for the needs of the community?

**3. Quality Improvement (max. 250 words)**

How is quality improvement built into this initiative, and what steps are being taken to ensure it continues to be effective over time?

**4. Collaboration (max. 250 words)**

Describe how you collaborated with others, including people with lived experience of suicide, in the initiative's development, implementation and evaluation.



**5. Please select one category from below with its corresponding question and address the question below. (Max. 500 words)**

- Outstanding Contribution:** What specific actions or initiatives has the nominee undertaken that demonstrate their outstanding contribution to suicide prevention, and how have these efforts made a significant and measurable impact?
- Communities in Action:** How has the initiative demonstrated active engagement and collaboration in addressing suicide prevention or advancing the cause, and what measurable outcomes or positive changes have resulted from their collective efforts?
- Priority Populations:** In what ways has the nominee's work specifically addressed the needs and challenges of priority populations, and what measurable improvements or advancements have been achieved for these groups as a result of their efforts?
- Innovative Practice and Research:** What innovative practices or research methods has the nominee developed or employed, and how have these approaches advanced the suicide prevention sector or solved complex challenges in a novel and effective way?
- Best Practice in Workplace:** What specific practices or initiatives has the nominee implemented to effectively address and reduce suicide risk in the workplace, and how have these measures positively impacted employee mental health and safety?

*Please feel free to support your response with clippings, testimonials, photos, video content/social media.*

### **Declaration:**

**I declare the information submitted in the nomination is true and correct to the best of my knowledge.**

**Name:**

**Signature:**

**Date:**

**Return form by 11.59 pm on Monday 28 October 2024.**

**Email:** [events@suicidepreventionaust.org](mailto:events@suicidepreventionaust.org)

**Post:** State LiFE Awards, Suicide Prevention Australia, GPO Box 219, Sydney NSW 2001

**Online:** complete an online form [here](#).

