**THE ELIZABETH EMBLEM**

**APPLICATION FORM**

This form is for anyone who wishes to apply for an Elizabeth Emblem to recognise the death of an individual in public service. Please refer to the information on gov.uk before completing this form. Completed forms should be submitted to the Cabinet Office: [elizabethemblem@cabinetoffice.gov.uk](mailto:elizabethemblem@cabinetoffice.gov.uk) or Honours and Appointments Secretariat, Room G/38, 1 Horse Guards Road, London, SW1A 2HQ. Please contact the Secretariat with any questions.

Note: Any person is able to apply on behalf of the next of kin of the deceased (NOK) with their consent if the NOK is unable to complete this application form without assistance.

**Part 1 - Details of the applicant**

This is the person who is the next of kin to the deceased.

|  |  |
| --- | --- |
| **Surname** |  |
| **First name(s)** |  |
| **Full postal address (including postcode)** |  |
| **Telephone number** |  |
| **Email address** |  |
| **Relationship to the deceased** |  |

**Part 2 - Particulars of the Deceased**

This is the person who has died.

|  |  |
| --- | --- |
| **Surname** |  |
| **First name(s)** |  |
| **Date of birth** |  |
| **Date of death** |  |
| **Nationality(s)** |  |
| **Employer at date of death** |  |

**Part 3: Circumstances of the individual's death**

This section should include details of how, when and where the death of your family member occurred. Please give as much detail as possible about the circumstances of the death. This box expands if you need more space.

|  |
| --- |
|  |

**Part 4 - Next of kin relationship**

The next of kin is the person recorded to be so or, if no such record exists, the first person from the following list who is still alive. This order of precedence is based on the rules of intestacy[[1]](#footnote-1).

Please tick the relevant box to provide your next of kin status.

|  |  |
| --- | --- |
| A. Surviving spouse (marriage or civil partnership) |  |
| B. Eldest child followed by other children in descending order of age |  |
| C. Eldest grandchild/great grandchild |  |
| D. Parent[[2]](#footnote-2) |  |
| E. Siblings of the whole blood[[3]](#footnote-3) |  |
| F. Children of siblings of whole blood |  |
| G. Siblings of the half blood[[4]](#footnote-4) |  |
| H. Children of siblings of the half blood |  |
| I. Grandparents |  |
| J. Aunt or Uncle of the whole blood |  |
| K. Children of Uncles/Aunts of the whole blood |  |
| L. Uncles/Aunts of the half blood |  |
| M. Children of Uncles/Aunts of the half blood |  |

**Part 5 – Enclosures and any other relevant information**

Please list all documents attached to this form.

If you do not have any relevant documents to submit, please state the reasons. We understand that it may be more difficult to obtain documents in relation to historic deaths. Please note that an application is unlikely to be recommended in cases where no evidence is available, but cases will be considered depending on their circumstances. Please contact the Secretariat if you have any questions.

It is particularly helpful if you are able to provide proof of the individual's employment and the individual's death certificate.

Please confirm which documents you have included as part of this application.

**Copies of relevant documents are acceptable. Please do not send original documents as we are unable to return them.**

|  |  |
| --- | --- |
| **Document** | **Included with application (Y/N)** |
| Proof of the deceased’s employment. This could be a payslip from the month of death, a contract with the employer, correspondence from the employer following the death etc. |  |
| A copy of the deceased’s death certificate. |  |
| A copy of the relevant page of the deceased’s Last Will and Testament where this records the next of kin, or such other documentation necessary to evidence this, i.e. marriage certificate, birth certificate, adoption record etc. |  |
| A copy of the coroner’s or other official's report where an inquest or equivalent investigation was held. |  |
| Any relevant investigation and police reports. |  |
| Any relevant media articles reporting on the incident that led to the death or other documents that help prove eligibility for The Elizabeth Emblem. |  |
| Any other documents (please list). | |
| If no documents are available, please state the reasons here. | |

**It is essential to wait until all legal proceedings (including inquests) are complete before submitting an application.**

**Part 6 - Declaration**

Please sign and date this form to indicate that you have read and understood the following statements:

* I understand that by submitting this application, I am authorising the Cabinet Office and any other government departments and relevant bodies to review the circumstances of the death of the individual.
* To the best of my knowledge the information I have given is correct and as full as possible.
* I am aware that it is fraudulent to knowingly withhold relevant information or to give false information.
* The Elizabeth Emblem may be annulled if it was found to be obtained fraudulently or if, after the award is made, there are other reasons to believe that the deceased person was not eligible.

Note: The section below should be completed by the next of kin, or on their behalf if they are unable to sign.

**Next of kin declaration**

If you are the next of kin, please complete the following section to complete the declaration.

|  |  |
| --- | --- |
| **Full name** |  |
| **Signed** |  |
| **Date** |  |

**Signing on behalf of next of kin**

If you are completing this form on behalf of the next of kin, and/or signing it because they are unable to, please complete the following section to complete the declaration.

|  |  |
| --- | --- |
| **Full name** |  |
| **Signed** |  |
| **Date** |  |
| **Contact details (email and phone number)** |  |
| **Relationship to the next of kin** |  |
| **Please confirm that you have the consent of the next of kin of the deceased to be completing this application form on their behalf** | *Please delete as appropriate:*  I confirm that the next of kin has given / has not given consent to this application |

**Please return this completed form to the email address below:**

**elizabethemblem@cabinetoffice.gov.uk**

If you are unable to return this form by email, please post it to the Honours and Appointments Secretariat, Room G/38, 1 Horse Guards Road, London SW1A 2HQ

**How the Cabinet Office collects and uses personal information**

Details are available on the [privacy information relating to honours nominations](https://www.gov.uk/government/publications/privacy-information-relating-to-honours-nominations/privacy-information-relating-to-honours-nominations)

1. <https://www.thegazette.co.uk/wills-and-probate/content/103523> [↑](#footnote-ref-1)
2. Including adoptive parents. [↑](#footnote-ref-2)
3. "Whole blood" means siblings who share both parents with the deceased. [↑](#footnote-ref-3)
4. "Half blood" means one parent in common with the deceased. [↑](#footnote-ref-4)