



### PROVINCIAL ~ ATLANTIC/ MARITIME ~ NATIONAL ~ INTERNATIONAL AWARD

## **NOMINATION FORM**

and

Impor	rtant information to consider when completing this form:
-	Achievement Award candidates must have completed their activity between 1 April 2024
	31 March 2025.

- Nomination forms must be complete to be considered.
- All activities must be accompanied by the name of the Provincial / Atlantic Maritime / National / International sanctioning body, along with a contact name and number to be used for verification of the event.
- Individual candidates must reside in the Town of Oromocto.
- If an organization or team representing Oromocto successfully meets the Guidelines for Nomination, all team members (both Resident and Non-Resident) would qualify.

## CATEGORY: (Check one)

□ PROVINCIAL ACHIEVEMENT AWARD

#### □ ATLANTIC - MARITIME ACHIEVEMENT AWARD

□ NATIONAL ACHIEVEMENT AWARD

## □ INTERNATIONAL ACHIEVEMENT AWARD

#### PLEASE PRINT:

#### **INDIVIDUAL NOMINEE:**

Name of Candidate (to be printed on certificate):\_\_\_\_\_

Mailing Address: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Home Phone:\_\_\_\_\_\_\_Alternate Phone:\_\_\_\_\_\_

Activity (name of sport or activity to be printed on certificate):

#### **TEAM NOMINEE:**

Teams that represented Oromocto may also be nominated.

Name of Team (to be printed on certificate):\_

# Please enclose a list of all team members, coaches and managers that will be printed on individual certificates.

Team Manager:	(Name of person who has access to all players on team)
Mailing Address:	Postal Code:
Phone:	Email:

Activity (name of sport or activity to be printed on certificate):

 $\sim$  CONTINUED ON BACK  $\sim$ 

In addition to providing information on the achievements of the candidate over the past year, please include the following:

- One letter in support of the candidate from someone other than the nominator.

- Information that might be considered noteworthy on the evening of the presentation of the award.

## **SUMMARY OF OUTSTANDING ACHIEVEMENTS**

Please complete the following for which the individual or team is being nominated (Provincial, Atlantic/Maritime, National, or International achievement Award). Include as much detail as possible about the event.

Name of Event	Date of Event	Category	Sanctioned By	Location

## SPECIAL AWARDS WON

(e.g. MVP, Outstanding Sportsmanship, High Scorer, All-Star:)

Name of person making nomination:_	
Mailing Address:	Postal Code:
Home Phone:	Business Phone:
Date:Signature:	

For more information, please email recreationoromocto.ca or call 357-4455. Please forward all completed nominations to:

> Oromocto Recognition Program c/o Recreation and Tourism Department 4 Doyle Drive Oromocto, NB E2V 2V3