



## MAYOR'S RECOGNITION AWARDS PROGRAM Nomination Form

Select the correct category for your nominee, and on a plain sheet of paper in 100 words or less provide detailed information as to why your nominee should be recognized for this award. **Type or print clearly.** In order for nomination to be considered, all sections of this form must be completed. Posthumous nominations cannot be accepted. For further information, please telephone 403- 845-2866.

**Name of Nominee or  
Team/Group Representative:** \_\_\_\_\_  
(First Name) (Last Name)

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

Telephone: \_\_\_\_\_  
(Business) (Residence)

**Name of Team/Group:** \_\_\_\_\_  
(If applicable)

**Date of Achievement:** \_\_\_\_\_  
(If applicable)

**Nominated by:** \_\_\_\_\_  
(Please print name)

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

Telephone: \_\_\_\_\_  
(Business) (Residence)

**Signature of Nominator:** \_\_\_\_\_

**Seconded by:** \_\_\_\_\_  
(Please print name)

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

Telephone: \_\_\_\_\_  
(Business) (Residence)

**Signature of Seconder:** \_\_\_\_\_

Is the nominee aware of this nomination?  Yes  No  
(Nominator may not be a member of the nominee's immediate family)

**Mail or Delivery Forms to:** Mayor's Recognition Awards Selection Committee  
Box 1509 (5116 50<sup>th</sup> Avenue)  
Rocky Mountain House, AB T4T 1B2

**NOMINATION DEADLINE IS March 14, 2018**