

**MANITOBA COUNCIL ON AGING RECOGNITION AWARDS  
Nomination Form 2013**

*I wish to make the following nomination for the 2013 Recognition Awards.*

**(Please place a check in ONE of the appropriate nomination category boxes)**

- A SENIOR VOLUNTEER WHO HAS MADE EXTRADORDINARY CONTRIBUTIONS TO INDIVIDUALS OF ANY AGE**
  
- A VOLUNTEER OF ANY AGE WHO HAS MADE EXTRAORDINARY CONTRIBUTIONS TO SENIORS**
  
- AN INTERGENERATIONAL GROUP/INITIATIVE WHO HAS MADE EXTRAORDINARY CONTRIBUTIONS THROUGH ACTIVITIES THAT ENCOURAGE AND INSPIRE INTERACTION BETWEEN YOUNGER AND OLDER GENERATIONS**

<input type="checkbox"/> <b>Mr.</b>		<input type="checkbox"/> <b>Mrs.</b>	<input type="checkbox"/> <b>Ms</b> (Please place a check in the appropriate box.)
<b>Nominee:</b> _____			
<small>First name / Group name (or name of Initiative)</small>		<small>Family name</small>	
<b>Address:</b> _____			
<small>Street</small>		<small>Box No.</small>	
<b>City/Town:</b> _____		<b>Postal Code:</b> _____	
<b>Telephone:</b> ( ) _____	<b>Fax:</b> ( ) _____	<b>e-mail:</b> _____	
<b>Nominator:</b> _____			
<small>First name</small>		<small>Family name</small>	
<b>Address:</b> _____			
<small>Street</small>		<small>Box No.</small>	
<b>City/Town:</b> _____		<b>Postal Code:</b> _____	
<b>Telephone:</b> ( ) _____	<b>Fax:</b> ( ) _____	<b>e-mail:</b> _____	

Two letters of support are included from the following: (Please print names)

1. \_\_\_\_\_
  
2. \_\_\_\_\_

***(Please see over for Steps in the Nomination Process)***

## STEPS IN THE NOMINATION PROCESS

1. Ensure that the candidate resides in Manitoba and the effort or activity for which s/he/the group is being nominated has taken place in Manitoba.
2. Note that nominations are limited by the following rule:  
*Manitoba Council on Aging members cannot be nominated during their term of office or for one year following their term.*
3. Please provide a detailed description of your reasons for making this nomination for the 2013 Recognition Awards. *NOTE: if nominating an individual who works with seniors please indicate how this person goes beyond their duties as a staff person.*
4. One additional page may be added to give details of the specific activities undertaken by the nominee(s).
5. Each nomination must be accompanied by two letters of support.
6. Additional information of up to six pages may be included e.g. news clippings, pamphlets or testimonials that are directly related to the activities for which the candidate has been nominated.
7. Please send copies of supporting materials, as originals will not be returned. Preferred format is 8½ x 11.
8. Please note that the selection of Award recipients is based solely on the information provided in the nomination package. It is therefore important that all materials required for the nomination be completed.
9. Ensure that the application is mailed in accordance with the deadline for nominations which is **Friday, September 13, 2013.**

### **Please return application to:**

Manitoba Council on Aging  
1610 - 155 Carlton Street  
Winnipeg MB R3C 3H8  
Phone: 204-945-6565 Toll-free: 1-800-665-6565  
Fax: 204-948-2514