



Citizens of Exceptional Achievement Awards

Monthly Award Nomination Form

(Please type or print clearly and in full) (Please use a separate nomination form for each submission)

NOMINEE

NAME OF INDIVIDUAL OR GROUP BEING NOMINATED:			
ADDRESS:			
CITY:		POSTAL CODE:	
TELEPHONE DAY:		TELEPHONE EVENING:	
EMAIL:		FAX:	

NOMINATED BY

NAME:			
ADDRESS:			
CITY:		POSTAL CODE:	
TELEPHONE DAY:	TELEPHONE EVENING:	FAX:	EMAIL:

SIGNATURE: _____ DATE: _____

For Office Use Only

APPROVED

MORE INFORMATION REQUIRED

DECLINED

Personal information on this form is collected under the authority of the Municipal Act for the purpose of administering the City's EAA program. Questions about this collection should be forwarded to Deputy City Clerk, City Hall 625-2230.

DESCRIPTION OF ACHIEVEMENTS IN DETAIL

FOR EXAMPLE:

- What made these achievements outstanding?
- What, if any, extraordinary circumstances or challenges did the Nominee/Group face or overcome?
- How have these achievements touched the lives of other/or benefited the community of Thunder Bay?

Include examples of leadership, innovation, dedication and time span shown in the achievement.

PLEASE NOTE that the selection of award recipients is based solely on information provided. If you are enclosing additional information with this, please indicate the number of pages attached.

MAIL / FAX / E-MAIL form to:
Office of The City Clerk
500 Donald Street, E.
Thunder Bay, ON P7E 5V3
PHONE 625-2230 FAX: 623-5468
website: www.thunderbay.ca/officialrecognition
e-mail: kpower@thunderbay.ca

Additional Material attached?

YES No. of Pages _____ NO