# AWARD OF MERIT FOR ADVOCACY OF SOCIAL JUSTICE

## Nomination Application Form

Individual  Agency

1. Name of individual or agency being nominated:

|  |  |  |  |
| --- | --- | --- | --- |
| **Name** | **Address** | **Email Address** | **Telephone** |
|  |  |  | ( ) |

1. **a) For individual nomination**: Positions held by this individual currently or in the past   
    (with dates if known):

|  |  |
| --- | --- |
| **Position(s)** | **Date** |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |

1. **For Agency nomination:** Brief description of the agency that is being nominated:

|  |
| --- |
|  |

1. Demonstration of dedication and achievement in the pursuit of social policies for the benefit of Edmontonians, particularly those who are most vulnerable, which the nominee has made (with dates if known and applicable):

|  |  |
| --- | --- |
| **Contributions** | **Date** |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |

1. Impact of the nominee on the community (please indicate your view of the community upon which the nominee has had an impact):

|  |
| --- |
|  |

1. Any other relevant information about the nominated individual/agency:

|  |
| --- |
|  |

1. Name of nominator and connection with the individual being nominated:

|  |  |
| --- | --- |
| **Name of Nominator:** | **Connection to Nominee:** |
|  |  |

1. Contact information of three other people who have worked with the nominee and whom our committee might contact:

|  |  |  |  |
| --- | --- | --- | --- |
| **Name** | **Address** | **Email Address** | **Telephone** |
|  |  |  | ( ) |
|  |  |  | ( ) |
|  |  |  | ( ) |

Please submit completed nomination form before the specified deadline by e-mail <mailto:info@edmontonsocialplanning.ca>