

**SPECIAL RECOGNITION AWARD  
NOMINATION FORM**

*Eligibility*

All residents and local organizations are eligible.  
The achievement must have enhanced the image of the Town of Coalhurst.  
There are no limits to the number of awards presented in any year.

*Awards*

Except for the Longevity Awards, the awards will be presented at an appropriate time and place, by a member(s) of Council. The date of the presentation will be subject to the availability of the recipient. Awards will include a framed certificate of recognition and a Town of Coalhurst pin. A media announcement will be made and distributed to all media outlets giving details of the award, the recipient and where possible the date and time of presentation.

*Please mark the Category for which you are making this nomination:*

\_\_\_\_\_ Athletic: to recognize an individual or team placing first, second or third in a local, provincial, national or international event or competition and which event or competition has been sanctioned by the respective local, provincial, national or international governing body of the particular sport.

\_\_\_\_\_ Fine and Performing Arts: to recognize an individual or group gaining local, provincial national or international acceptance or recognition of outstanding achievement in one or more of the arts. The recognition may be fore: a specific achievement or a series of accomplishments.

\_\_\_\_\_ Citizenship: to recognize: *Distinguished Voluntary Service* that has had a significant impact in the Town of Coalhurst or *Continuous Voluntary Service* of 15 years or more that has an identifiable benefit to the Town of Coalhurst. This service must be continuous and may have occurred with more than one organization in Coalhurst.

\_\_\_\_\_ Mayor's Special Award: to recognize an individual whose service or achievement at the local, provincial, national or international level has been of singular significance, has enhanced the image of the Town of Coalhurst, and whose accomplishments are not adequately described within the framework of the criteria for the Athletics, Fine and Performing Arts or Citizenship categories.

\_\_\_\_\_ Longevity Award: to recognize long-term residents of Coalhurst on significant birthdays and anniversaries. Birthdays start at age 80 with subsequent recognition at each 5-year increment thereafter. Anniversaries: 25<sup>th</sup>, 40<sup>th</sup>, 50<sup>th</sup>, 60<sup>th</sup>, 75<sup>th</sup>. Longevity Awards will be returned to the person making the request for presentation at an appropriate time.

Date of birthday \_\_\_\_\_ Age: \_\_\_\_\_

Date of anniversary \_\_\_\_\_ Number of Years: \_\_\_\_\_

*Please complete page 2*

**Tell us about the person you are nominating (please print):**

Name: \_\_\_\_\_

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

Telephone Number (during business hours): \_\_\_\_\_

Details of the reason for the nomination (please use another page if needed): \_\_\_\_\_

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Photographs may be used in the Town News or in Media Releases – please make sure you have permission to use the photo from the person(s) in the picture. Photographs will be returned.

Are you enclosing photo(s)? \_\_\_\_\_ yes \_\_\_\_\_ no

Have you obtain permission for us to use these photographs? \_\_\_\_\_ yes \_\_\_\_\_ no

Name of individual or group making this nomination: \_\_\_\_\_

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

Telephone Number (during business hours): \_\_\_\_\_

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

*Signature of Nominee (not necessary for Longevity Awards)*

By signing below, I certify that I agree to let my name stand for the nomination. All personal information on this application is subject to the disclosure rules set forth in the Freedom of Information and Protection of Privacy Act. I consent to releasing the information included in this nomination to the Town of Coalhurst and media for news releases and articles. I also consent to releasing my telephone number for contact by the media for interviews, however, I reserve the right to refuse any media interview.

\_\_\_\_\_  
Name of Nominated Individual      Signature of Nominated Individual      Date

\_\_\_\_\_  
Name & Organization Represented      Signature of Organization Representative      Date

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