



2022 Award of Distinction Nomination Form for Groups (2+)

Name of Group (if applicable):

Nominee #1	
First Name	Last Name
Role	<input type="checkbox"/> Administrator <input type="checkbox"/> Parent <input type="checkbox"/> Teacher (Elementary) <input type="checkbox"/> Student <input type="checkbox"/> Teacher (Secondary) <input type="checkbox"/> Support Staff – Position: _____ <input type="checkbox"/> Volunteer
School/Worksite	
Daytime Phone Number	Evening Phone Number
Cell Phone Number	Email
Nominee #2	
First Name	Last Name
Role	<input type="checkbox"/> Administrator <input type="checkbox"/> Parent <input type="checkbox"/> Teacher (Elementary) <input type="checkbox"/> Student <input type="checkbox"/> Teacher (Secondary) <input type="checkbox"/> Support Staff – Position: _____ <input type="checkbox"/> Volunteer
School/Worksite	
Daytime Phone Number	Evening Phone Number
Cell Phone Number	Email
Nominee #3	
First Name	Last Name
Role	<input type="checkbox"/> Administrator <input type="checkbox"/> Parent <input type="checkbox"/> Teacher (Elementary) <input type="checkbox"/> Student <input type="checkbox"/> Teacher (Secondary) <input type="checkbox"/> Support Staff – Position: _____ <input type="checkbox"/> Volunteer
School/Worksite	
Daytime Phone Number	Evening Phone Number
Cell Phone Number	Email
Nominee #4	
First Name	Last Name
Role	<input type="checkbox"/> Administrator <input type="checkbox"/> Parent <input type="checkbox"/> Teacher (Elementary) <input type="checkbox"/> Student <input type="checkbox"/> Teacher (Secondary) <input type="checkbox"/> Support Staff – Position: _____ <input type="checkbox"/> Volunteer
School/Worksite	
Daytime Phone Number	Evening Phone Number
Cell Phone Number	Email
Nominee #5	
First Name	Last Name
Role	<input type="checkbox"/> Administrator <input type="checkbox"/> Parent <input type="checkbox"/> Teacher (Elementary) <input type="checkbox"/> Student <input type="checkbox"/> Teacher (Secondary) <input type="checkbox"/> Support Staff – Position: _____ <input type="checkbox"/> Volunteer
School/Worksite	
Daytime Phone Number	Evening Phone Number
Cell Phone Number	Email



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Nominee #6			
First Name		Last Name	
Role	<input type="checkbox"/> Administrator <input type="checkbox"/> Teacher (Elementary) <input type="checkbox"/> Teacher (Secondary)	<input type="checkbox"/> Parent <input type="checkbox"/> Student <input type="checkbox"/> Support Staff – Position: _____ <input type="checkbox"/> Volunteer	
School/Worksite			
Daytime Phone Number		Evening Phone Number	
Cell Phone Number		Email	
Nominee #7			
First Name		Last Name	
Role	<input type="checkbox"/> Administrator <input type="checkbox"/> Teacher (Elementary) <input type="checkbox"/> Teacher (Secondary)	<input type="checkbox"/> Parent <input type="checkbox"/> Student <input type="checkbox"/> Support Staff – Position: _____ <input type="checkbox"/> Volunteer	
School/Worksite			
Daytime Phone Number		Evening Phone Number	
Cell Phone Number		Email	
Nominee #8			
First Name		Last Name	
Role	<input type="checkbox"/> Administrator <input type="checkbox"/> Teacher (Elementary) <input type="checkbox"/> Teacher (Secondary)	<input type="checkbox"/> Parent <input type="checkbox"/> Student <input type="checkbox"/> Support Staff – Position: _____ <input type="checkbox"/> Volunteer	
School/Worksite			
Daytime Phone Number		Evening Phone Number	
Cell Phone Number		Email	
Nominee #9			
First Name		Last Name	
Role	<input type="checkbox"/> Administrator <input type="checkbox"/> Teacher (Elementary) <input type="checkbox"/> Teacher (Secondary)	<input type="checkbox"/> Parent <input type="checkbox"/> Student <input type="checkbox"/> Support Staff – Position: _____ <input type="checkbox"/> Volunteer	
School/Worksite			
Daytime Phone Number		Evening Phone Number	
Cell Phone Number		Email	
Nominee #10			
First Name		Last Name	
Role	<input type="checkbox"/> Administrator <input type="checkbox"/> Teacher (Elementary) <input type="checkbox"/> Teacher (Secondary)	<input type="checkbox"/> Parent <input type="checkbox"/> Student <input type="checkbox"/> Support Staff – Position: _____ <input type="checkbox"/> Volunteer	
School/Worksite			
Daytime Phone Number		Evening Phone Number	
Cell Phone Number		Email	

Nominator			
First Name		Last Name	
Role	<input type="checkbox"/> Administrator <input type="checkbox"/> Parent <input type="checkbox"/> Student <input type="checkbox"/> Support Staff <input type="checkbox"/> Teacher <input type="checkbox"/> Volunteer		
School/Worksite			
Daytime Phone Number		Evening Phone Number	
Cell Phone Number		Email	
Nominator's Signature		Date	

Supporters of Nomination		
Name	Role/Position	School/Worksite

Nominations are to be submitted by *Friday, 2022 February 18, at 4:00 p.m.*
To: Sherry Hines, Trustees' Office, Director's Services
Thames Valley District School Board
1250 Dundas Street, London, ON N5W 5P2
Email: s.hines@tvdsb.ca
Fax: 519-452-2396

The completed nomination package consists of:

- This completed nomination form (**MUST be signed by the nominator**).
- A nomination letter that describes why you are making the nomination and how the nominee meets two (2) or more of the selection criteria.
- Supporting Material – You may have up to 10 pages (front to back) of supporting materials. If other supporting material is included in the nomination package, you will be contacted to revise your submission. Letters of support can be from colleagues, students, community representatives, etc. Support letters should provide clear evidence and examples that demonstrate how the nominee models the Mission, Vision and Commitments of the Thames Valley District School Board. **This is the only information that the Selection Committee will use to select the recipients, therefore, it must present a very clear picture of the individual.**

Additional information may be obtained from the Board's website at www.tvdsb.ca

Notice of Collection: The personal information provided on this form and any other correspondence relating to involvement in Board programs is collected by the Thames Valley District School Board under the authority of the Education Act and Regulations (R.S.O. 1990 c.E.2) as amended. The information will be used to register the student in a school, for the collection of applicable student/activity fees, as well as for any consistent purpose. Information is shared with employees such that they may carry out their job duties. In addition the information may be used or disclosed to comply with legislation, for compelling circumstances affecting health and safety or discipline, as required in circumstances related to law enforcement matters, or in accordance with any other Act. For questions about this collection, contact the Board's Freedom of Information Co-ordinator, Thames Valley District School Board, 1250 Dundas Street, London, Ontario, N6A 5L1, Telephone 519-452-2000 ext. 20218. (Revised April 2013)