

NOMINATION FORM

2016 Dalhousie Alumni Association Awards

Thank you for participating in the celebration of Dalhousie’s outstanding alumni.

Please fill in the following information:

**Nominator**

Name (full): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Profession: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Place of employment (*or if retired, most recent)*:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Position: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Relationship to nominee: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address (to receive results): \_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Award Nominee**

Name (full): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Profession: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Place of employment (*or if retired, most recent)*:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Position: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Degree(s): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Year of graduation (approx.): \_\_\_\_\_\_\_\_\_

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

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Please answer the following 3 questions:**

1. Please indicate the applicable award category for this nomination:

* Christopher J. Coulter Award: *(Age 40 years or under)*
* A. Gordon Archibald Award:  *(Service to Dalhousie)*
* Lifetime Achievement Award: *(Lifetime Achievement)*
* Volunteerism Award: *(Community Volunteerism)*

Note: to submit a nomination for the Award of Excellence for Teaching*,* please visit *learningandteaching.dal.ca*

1. There is a minimum requirement of two letters of reference documenting the nominee’s accomplishments. Have you included at least two reference letters? **Yes** / **No**

How many letters total and from whom?

3. Please answer the following three questions (*use more space if required):*

* 1. RATIONALE FOR NOMINATION: Please describe the reasons for your nomination.
  2. CONTEXT: Is there a context that the selection committee should be aware of when considering your nominee (e.g., career choices, overcoming personal obstacles, circumstances in their career or business environment)?
  3. IMPACT: Can you elaborate on the impact of your nominee’s accomplishments (e.g., created change, created stability, improved lives)?

***Suggested documents:*** *The following are not required but can assist the selection committee by filling-out the nominee’s story and character:*

1. *Resume*
2. *Personal anecdotes*
3. *Additional reference letters.*

**Please note:**

* By submitting this nomination, you understand that the award selection committee may contact you with follow-up questions.
* Nominations will be considered for two years.

*Exception: Nominees for the Christopher J. Coulter award who turn 41 during the year of their nomination (e.g. nominated for 2016 Awards, and turn 41 during 2016), will be considered for only one year, (e.g. will not be re-considered for the 2017 awards).*

* Nominators do not need to be alumni of Dalhousie, nor do references.
* **Deadline**: The nomination period will close on February 15, 2016. All nominations must be emailed or postmarked by 11:59 p.m. on February 15.

Questions: [alumniawards@dal.ca](mailto:alumniawards@dal.ca), 902.494.6857 or 1.800.565.9969 (toll-free)

**Submit your nomination form by:**

Email: [alumniawards@dal.ca](mailto:alumniawards@dal.ca)

Dalhousie University   
Office of Advancement

c/o Alice Ridgway, DAA Awards

PO Box 15000

Halifax, NS B3H 4R2

Canada

Post:

Fax: 902.494.6900

Nominator’s signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please print this form in order to complete the signature section. Mailed, faxed or scanned and emailed forms will be accepted.

Thank you very much for participating in the Alumni Awards program. We will contact you at the close of the selection process.