NOMINATION FORM



PERFORMING ARTS RECOGNITION AWARD (INDIVIDUAL)

NOTE: PLEASE INCLUDE A DIGITAL PHOTO OF THE PERSON BEING NOMINATED FOR USE AT THE AWARDS SHOW

ENSURE TO READ CRITERIA FOR THIS NOMINATION PRIOR TO COMPLETION

| THE NOMINEE (PLEASE PRINT OR TYPE) | |
|---|---------------|
| NAME | TELEPHONE # |
| ADDRESS | POSTAL CODE |
| EMAIL | |
| SCHOOL/INSTITUTE | |
| GRADE/LEVEL/STUDIES | |
| | |
| 1. Time commitment to performing arts | |
| Number of hours per week | |
| Date started | Date finished |
| Comments on time commitment: | |
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| 2. Awards or recognition received during calendar year of competition | |
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| 3. Nominator's general comments | |
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| | |
| THE MOMENTOR | |
| THE NOMINATOR | |
| NAME | TELEPHONE # |
| ADDRESS | |
| EMAIL | |
| NOMINATING ORGANIZATION | |
| | |
| SIGNATURE OF NOMINATOR | DATE |