NOMINATION FORM

MOUNT PEARL VISUAL ARTS AWARD



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) _____ DATE OF BIRTH _____ NAME____ ADDRESS_____ POSTAL CODE _____ TELEPHONE # _____ EMAIL _____ SCHOOL/INSTITUTE___ GRADE/LEVEL/STUDIES___ 1. Time commitment to visual arts Number of hours per week _____ __ Date finished _____ Date started_____ Comments on time commitment: 2. Awards or recognition received during calendar year of competition

3. Nominator's General Comments	
THE NOMINATOR	
NAME	TELEPHONE #
ADDRESS	
EMAIL	
NOMINATING ORGANIZATION	
SIGNATURE OF NOMINATOR	DATE