

**CELEBRATING COMMUNITY, STUDENT AND EMPLOYEE EXCELLENCE**

**A TRIBUTE FROM TRUSTEES**

**Nomination Form**

**Please refer to the attached criteria for the Community, Student and Employee Excellence Program.**

**NOMINEE(S)**

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| --- | --- | --- | --- |
| **Name(s):** | **Site Location:** | **Position:** | **Phone number:** |
|  |  |  |  |

**NOMINATOR**

|  |  |
| --- | --- |
| **Name:** | **Position:** |
| **Site Location:** | **Phone number:** |

**Connection to the SCDSB: COMMUNITY MEMBER  STUDENT  STAFF**

**CRITERIA**

Development of initiatives that result in significant enrichment of the educational experience of students or colleagues or the advancement of public education while working on a special project or initiative.

Receipt of local, provincial, national or international awards.

**DETAILS OF THE OUTSTANDING CONTRIBUTION**

**Please provide the reasons for the nomination.**

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**(Please attach additional information if desired)**

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| Date of Submission: |  |

FORWARD THE COMPLETED NOMINATION FORM TO THE CHAIRPERSON OF THE BOARD

c/o THE EXECUTIVE ASSISTANT TO THE BOARD (email: jhenry@scdsb.on.ca).

FORM A4090 – 1; Rev. 11/18