



# Council of Federation Literacy Award Nomination Form



## **NOMINEE:**

(Please type or print clearly)

Name: \_\_\_\_\_

Address: \_\_\_\_\_ City/Town: \_\_\_\_\_

Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Daytime Telephone: \_\_\_\_\_ Evening Telephone: \_\_\_\_\_

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

I agree to be nominated for the Council of Federation Literacy Award. The information provided is accurate and I consent to the use of this information by the Government of Nunavut and the Council of the Federation Literacy Award Selection Committee for the purpose of evaluating and selecting award recipients. If I receive the award, I also consent to having my name, age, hamlet, summary of achievements, and photograph released to the media and included in government publications for publicity purposes associated with the award.

\_\_\_\_\_  
Signature of Nominee

## **NOMINATOR:**

(Please type or print clearly)

Name: \_\_\_\_\_

Address: \_\_\_\_\_ City/Town: \_\_\_\_\_

Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Daytime Telephone: \_\_\_\_\_ Evening Telephone: \_\_\_\_\_

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

\_\_\_\_\_  
Signature of Nominator

