

<b>ST. JOHN'S</b>	<b>CS – Councillor Debbie Hanlon Award</b>	<b>Community Services</b>
	<b>Councillor Debbie Hanlon Award for Senior of the Year</b>	

<b>Nominee Information</b>	<b>SECTION 1</b>
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Name \_\_\_\_\_ Ward \_\_\_\_\_

Street Address \_\_\_\_\_ City \_\_\_\_\_ Postal Code \_\_\_\_\_

Phone (home) \_\_\_\_\_ (work) \_\_\_\_\_ (cell) \_\_\_\_\_

Email \_\_\_\_\_ Date of Birth (YYYY/MM/DD) \_\_\_\_\_

(nominee must be at least 60 years of age)

<b>Nominee Declaration (Mandatory)</b>	<b>SECTION 2</b>
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I confirm that I am a resident of St. John's:      Yes      No

I am aware of and in agreement with the submission of this nomination.

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

<b>Nominator Information</b>	<b>SECTION 3</b>
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Name \_\_\_\_\_ Email \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ Postal Code \_\_\_\_\_

Phone (home) \_\_\_\_\_ (work) \_\_\_\_\_ (cell) \_\_\_\_\_

Relationship to Nominee \_\_\_\_\_

<b>Nominator Declaration</b>	<b>SECTION 4</b>
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I acknowledge that the nominee meets the nomination guidelines and has been made aware of this nomination. I further acknowledge that I have attached all necessary documentation, as indicated by the check boxes.

Nominee Information

Nominator Information

Reason for Nomination- no more than one (1) page

Minimum of one (1) letter of support- dated and signed by supporter

Additional Information- no more than two (2) pages (awards, photos, newspaper clippings)

**If this is a posthumous nomination, the signature of a family member is required.**

Family Member (please print) \_\_\_\_\_ Relationship to Nominee \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

### 1. Reason for Nomination:

This information must be provided by the nominator and must outline why the Nominee should receive the Senior of the Year Award. Please include information on Nominee's volunteer service and how he/she has made a positive impact on residents of St. John's.

### 2. Letter of Support:

A minimum of one (1) letter of support. The letter of support cannot come from a family member and must include the following information: name, address, postal code, phone, and email address. The letter(s) should be printed or typed, dated and signed by supporter.

### 3. Additional Information:

The Nominator may also include additional information with the nomination which may include: copies of certificates, newspaper articles, and/or stories. Additional information must not exceed two (2) pages.

### 1. Purpose

The City of St. John's will recognize a senior who has had significant accomplishments, achievements, work experience and volunteerism to the City through:

- Service to the Community.
- Improving the quality of life of citizens through community involvement (i.e. music, sport, recreation, arts, etc.).

### 2. Qualifications

- Nominee must be 60 years of age or older.
- Nominee must be a current resident of St. John's (or a resident within the past 6 months).
- Nominee can be nominated by an organization, group or individual.
- A combination of volunteer and paid work accepted.
- Posthumous nominations will be accepted.
- Self-nominations are NOT accepted

**3. Nominating Process**

- Nominators and references cannot be members of the nominee’s immediate family.
- Current members of the Seniors Advisory Committee (SAC) are not eligible to be nominated but can nominate a candidate.
- A minimum of one (1) letter of support is required.
- No more than two (2) pages of supporting documentation.

**4. Award Selection Process**

- A selection committee comprised of members of the Seniors Advisory Committee (SAC) will review all applications.
- The selection committee will present its recommendations to the Seniors Advisory Committee (SAC) for selection.
- A senior can only win the award once; anyone who has been named Senior of the Year will not be eligible for future nominations.
- Nomination forms will be kept for one year, then disposed of in a secure manner.
- Nominations will be assessed on the following criteria: Volunteer Involvement and Commitment, Impact on Individuals and Community, and Diversity of Contribution.

Privacy Notice

**SECTION 7**

Collection of personal information via this form is authorized under the Access to Information and Protection of Privacy Act, 2015 and is needed to process this application. Questions about the collection and use of the information may be directed to Manager of Community Programs & Services by emailing [recreation@stjohns.ca](mailto:recreation@stjohns.ca)

Please send completed form to:

City of St. John’s –  
 Recreation Division  
 P.O. Box 908, 10 New Gower Street  
 St. John’s, NL A1C 5M2

For further information:  
 Phone: 709-576-8411

Email: [adultandseniors@stjohns.ca](mailto:adultandseniors@stjohns.ca)