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| **Nominee’s information** | |
| Nominee’s full name |  |
| Current title/occupation |  |
| Mailing address |  |
| Phone |  |
| Email |  |
| Honorary Degree recommended (Please check one) | Honorary Doctor of Laws Honorary Doctor of Letters Honorary Doctor of Science  Honorary Doctor of Athabasca University |
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| **Nominator’s information** | | | |
| Nominator’s name |  | | |
| Current title/occupation |  | | |
| Mailing address |  | | |
| Phone |  | | |
| Em ail |  | | |
| Signature |  | Date |  |
| 1st Supporter’s name |  | | |
| 2nd Supporter’s name |  | | |
| 3rd Supporter’s name |  | | |

Submit electronically to: **Tyler Tollefson, Chief Governance Officer and General Counsel** Email: [ocgogovernance@athabascau.ca](mailto:ocgogovernance@athabascau.ca)

Nominations will be accepted until Monday, March 11, 2024.

The personal information collected on this form is collected under the authority of section 33(c) of the Alberta Freedom of Information and Protection of Privacy Act and will be used by the Board of Governors Honorary Awards Committee to select an individual to receive this award and to celebrate their achievements. Once a successful nominee has been chosen, this information will be shared in the strictest of confidence with individuals at Athabasca University who require it to give effect to the Honorary Awards program. If you have any questions about the collection and use of this information, please contact the [Office of the Chief Governance Officer and General Counsel.](mailto:ocgogovernance@athabascau.ca)

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| **Rationale for nomination**  **(To be completed by nominator)**  *Clearly describe the reasons for the nomination and the contributions/achievements of the nominee. Do not assume that members of the Honorary Awards Committee have personal knowledge of the candidate or the nominators. A biographical summary is helpful; however, a full bio or curriculum vitae is only required if it is deemed to be of importance by the nominator.* | |
| Nominee’s name |  |
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| **Supporting statement # 1 (To be completed by supporter)**  Note: a signed supporting statement may be attached | | | |
| Nominee’s name |  | | |
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| Supporter’s name |  | | |
| Current title/occupation |  | | |
| Mailing address |  | | |
| Phone |  | | |
| Em ail |  | | |
| Supporter's signature |  | Date |  |

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| **Supporting statement # 2 (To be completed by supporter)**  Note: a signed supporting statement may be attached | | | |
| Nominee’s name |  | | |
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| Supporter’s name |  | | |
| Current title/occupation |  | | |
| Mailing address |  | | |
| Phone |  | | |
| Em ail |  | | |
| Supporter's signature |  | Date |  |

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| **Supporting statement # 3 (To be completed by supporter)**  Note: a signed supporting statement may be attached | | | |
| Nominee’s name |  | | |
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| Supporter’s name |  | | |
| Current title/occupation |  | | |
| Mailing address |  | | |
| Phone |  | | |
| Em ail |  | | |
| Supporter's signature |  | Date |  |