





National Award Nomination Form

	As indicated by the box checked, I am submitting a nomination for the following award.			
	Alex Cross Award This award is issued to a member for displaying the highest standards of professional practice during the past year.			
	Alexander Officer Award This award is issued to an organization or agency for outstanding and meritorious achievements in the field of public or environmental health.			
	Environmental Health Review Award This award is issued to a member, non-member, individual or organization for excellence in presenting an environmental health issue or topic to the public.			
	President's Award This award is issued to a former member of the National Executive Council, Board of Certification, Council of Professional Experience or Environmental Health Foundation of Canada who has demonstrated outstanding service and commitment to the Canadian Institute of Public Health Inspectors while in office.			
	Honorary Membership This award is issued to a person who is not eligible for Regular, Retired or Life membership in the Canadian Institute of Public Health Inspectors, for outstanding support, contribution or service to the association or Public Health Inspectors in Canada in general.			
	Life Membership This award is issued to a member of the Canadian Institute of Public Health Inspectors for outstanding service to the Institute, to his or her profession and/or to his or her community over an extended period of time.			
Please note that criteria for each award can be downloaded from Our Awards				
Word count for narrative (where applicable):				
N	lominee Information			
F	Full Name:			
M	Mailing Address:			
Т	elephone: E-mail:			







The nominee knows that they have been nominated for this award
The nominee does **not** know that they have been nominated for this award

First Nominator Information				
Full Name:				
Mailing Address:				
Telephone:	E-mail:			
Signature:				
Second Nominator Information				
Second Nominator Information				
Second Nominator Information Full Name:				
Full Name:	E-mail:			
Full Name: Mailing Address:	E-mail:			
Full Name: Mailing Address:	E-mail:			

- Please attach the appropriate supporting documentation for the award(s) marked. Refer to the specific criteria of the award(s) to ensure that the nomination package is completed.
- Complete applications submitted by deadline will be considered for these Awards.
- In addition to the narrative, include a concise version **limited to 350 words** that will be read during the National Awards Ceremony and / or the President's Banquet. The narrative will be altered at the discretion of the Awards Committee.

Please send nominations and supporting documents to:

CIPHI Awards Committee

#720 – 999 West Broadway Ave Vancouver, BC, V5Z 1K5

Fax: (604) 738 4080 Email: office@ciphi.ca

For further questions please contact: awards@ciphi.ca

Office Use Only		
Date Received:		
Nominee Information Complete:		
1 st Nominator Information Complete:		
2 nd Nominator Information Complete:		
Narrative and Supporting Documents Received:		