

Union awards NOMINATION FORM



Details of Nominee

Name: _____ Membership number: _____

Worksite: _____ Department: _____

Brief outline of activism history: _____

Nominated for the following award: _____

Details of nominators

1 Name _____ Mem# _____ Signature _____

2 Name _____ Mem# _____ Signature _____

3 Name _____ Mem# _____ Signature _____

4 Name _____ Mem# _____ Signature _____

5 Name _____ Mem# _____ Signature _____

6 Name _____ Mem# _____ Signature _____

7 Name _____ Mem# _____ Signature _____

8 Name _____ Mem# _____ Signature _____

9 Name _____ Mem# _____ Signature _____

10 Name _____ Mem# _____ Signature _____

11 Name _____ Mem# _____ Signature _____

12 Name _____ Mem# _____ Signature _____

Contact member (may be one of the nominators)

Name: _____ Department: _____

Membership number: _____ Worksite: _____

Phone (w) _____ Phone (hm) _____

Mobile: _____ Email: _____