

THE COUNCIL OF THE FEDERATION Excellence in Water Stewardship Award

Nomination Form

NOMINEE INFORMATION (Please print clearly and sign below.)

Name of Organization:

Name and Title of Representative :

Mailing Address:

City/Town:	Province/Territory:	Postal Code:
Home Telephone:	Work Telephone:	Email:

I, _____ agree, on behalf of _____, to be nominated for the Council of the Federation Water Stewardship Award. I confirm the information provided is accurate, and consent to the use and exchange of this information between the Government of the Northwest Territories and the Council of the Federation Award Selection Committee for the purpose of evaluating and selecting award recipients.

If I receive this award, I also consent to having my name, hometown, summary of achievements and photograph released to the media and included in Government of the Northwest Territories' publications for publicity purposes associated with the award.

Signature of Nominee:

NOMINATOR INFORMATION (Please print clearly and sign below.)

Name:

Title and Organization (if applicable):

Mailing Address:

City/Town:	Province/Territory:	Postal Code:
Home Telephone:	Work Telephone:	Email:

Relationship to the Nominee:

Signature of Nominator: Date: