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### Award Information

The Ontario Senior of the Year Award gives each municipality in Ontario the opportunity to honour one outstanding local Ontarian who after the age of 65 has enriched the social, cultural or civic life of his or her community.

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### Who is eligible?

Your nominee must be:

- At least 65 years of age.
- A resident of Ontario.
- A living person who has made their community a better place to live.
- Nominated by a municipality in Ontario.

Nominations will not be accepted if they are self-nominated for elected federal, provincial, municipal representatives or for political appointees.

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### How are the recipients selected?

If nomination criteria are met, a certificate will be mailed to the municipality within three to four weeks of receiving the submission.

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### Required Information

- Municipality Information
- Nominee's name and contact information (home address, telephone number, email etc.)
- Municipal representative contact information (name, business address, telephone number, email etc.)

Please send completed forms to the following:

The Corporation of the Township of Dawn-Euphemia  
4591 Lambton Line, RR4  
Dresden, ON N0P 1M0  
Ph: 519-692-5148  
Fax: 519-692-5148  
Email: [clerk@dawneuphemia.on.ca](mailto:clerk@dawneuphemia.on.ca)  
Website: [www.dawneuphemia.ca](http://www.dawneuphemia.ca)

**Instructions**

For the deadline date, please visit [www.ontario.ca/honoursandawards](http://www.ontario.ca/honoursandawards) or contact the Volunteer Recognition Unit.

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The Corporation of the Township of Dawn-Euphemia  
4591 Lambton Line, RR4  
Dresden, ON N0P 1M0  
Ph: 519-692-5148  
Fax: 519-692-5148  
Email: [clerk@dawneuphemia.on.ca](mailto:clerk@dawneuphemia.on.ca)  
Website: [www.dawneuphemia.ca](http://www.dawneuphemia.ca)

Your comments regarding the form and process are welcome. Please email your comments directly to us at the above email address.

**Municipality Information - Step 1 of 5**

Name of Municipality/Township

**Business Address**

Street No.	No. Suffix	Street Name	Street Type	Street Direction	Unit/Suite/Apt
Delivery Mode <input type="checkbox"/> General Delivery <input type="checkbox"/> Mobile Route <input type="checkbox"/> Post Office Box <input type="checkbox"/> Rural Route <input type="checkbox"/> Suburban Service			PO Box No. (e.g., 123456)	Rural Route No. (e.g., 123456)	
City		Province	Postal Code (e.g., M7A2R9)		
Primary Telephone Number (e.g., 555-555-5555 x555)			Alternate Telephone Number (e.g., 555-555-5555 x555)		
Email (e.g. email@address.com)					

Preferred Language of Communication     English     French

**Nominee Information - Step 2 of 5**

Form of address (e.g. Dr., Honourable, Sargent, Reverend, Elder)

First Name	Last Name
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**Home Address**

City Address     Rural Route or PO Box Address

Street No.	No. Suffix	Street Name	Street Type	Street Direction	Unit/Suite/Apt
Delivery Mode <input type="checkbox"/> General Delivery <input type="checkbox"/> Mobile Route <input type="checkbox"/> Post Office Box <input type="checkbox"/> Rural Route <input type="checkbox"/> Suburban Service			PO Box No. (e.g., 123456)	Rural Route No. (e.g., 123456)	
City		Province	Postal Code (e.g., M7A2R9)		

Primary Telephone Number (e.g., 555-555-5555 x555)

Alternate Telephone Number (e.g., 555-555-5555 x555)

Email (e.g. email@address.com)

Preferred Language of Communication  English  French

### Ceremony Presentation Date - Step 3 of 5

Please provide the ceremony presentation date, if confirmed. (mm/dd/yyyy)

Certificate will be mailed within three to four weeks of receiving the submission.

### Municipal Representative Information - Step 4 of 5

Form of address (e.g. Dr., Honourable, Sargent, Reverend, Elder)

First Name

Last Name

Position/Title

Primary Telephone Number (e.g., 555-555-5555 x555)

Alternate Telephone Number (e.g., 555-555-5555 x555)

Email (e.g. email@address.com)

Preferred Language of Communication  English  French

### Declaration - Step 5 of 5

The Ontario government is committed to ensuring the privacy of your personal information. In accordance with subsection 39(2) of the *Ontario Freedom of Information and Protection of Privacy Act*, R.S.O. 1990, c.F.31, the personal information collected on this form is necessary to the proper administration of the **Ontario Senior of the Year** which is a program that is consistent with the mandate of the Ministry prescribed under s. 4 of the *Ministry of Citizenship and Culture Act*, R.S.O. 1990, c. M.18. The personal information collected are used solely for the determination of nominee's eligibility and review and recommendation by the selection body.

The personal information collected in this nomination package belongs in perpetuity to the nominator and cannot be shared for purposes other than the administration of the program without express written consent of the nominator.

For further information, please contact:

Manager, Volunteer Recognition Unit  
Ministry of Citizenship and Multiculturalism  
Telephone: 416-326-0206 (toll free: 1-833-986-4022)  
1075 Bay St, 7th Floor  
Toronto, ON M5S 2B1

I confirm my nominee meets the eligible requirements and hereby certify that I am a municipal representative or designate and declare that all information provided in this application is true and accurate in every respect.

Nominator Signature

Date