

# Ontario Senior of the Year Award Deadline April 10

# **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.

#### 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.

# 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.

# **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 NOP 1M0

Ph: 519-692-5148 Fax: 519-692-5511

Email: clerk@dawneuphemia.on.ca Website: www.dawneuphemia.ca

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# Instructions

For the deadline date, please visit www.ontario.ca/honoursandawards or contact the Volunteer Recognition Unit.

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4591 Lambton Line, RR4 Dresden, ON N0P 1M0

Ph: 519-692-5148 Fax: 519-692-5511

Email: clerk@dawneuphemia.on.ca Website: 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								
Dusiness Address								
Business Address Street No. No. Suffix Street Name			Street Type	Street Direction	Unit/Suite/Apt			
Ne. Gallin	ou strums			Cured Bireduen				
Delivery Mode PO Box No			(e.g., 123456)	Rural Route No. (e.g., 123456)				
General Delivery Mobile Route Post Office Box								
Rural Route Suburban Service								
City	Province	•		Postal Code (e.g., M7A2R9)				
Primary Telephone Number (e.g., 555-555-5555 x555)  Alternate Telephone Num			ne Number (e.g.,	555-555-5555 x555	5)			
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								
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 PO Box No. (e.g., 123456)				Rural Route No. (e.g., 123456)				
General Delivery Mobile Route	Post Office Box							
Rural Route Suburban Service								
Province Province				Postal Code (e.g., M7A2R9)				

Primary Telephone Number (e.g., 555-5	55-5555 x555)	Alternate Telephone	none Number (e.g., 555-555-5555 x555)				
Email (e.g. email@address.com)							
Preferred Language of Communication							
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 Informa	tion - 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., 555-5	55-5555 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 <i>Ontario Freedom</i> of <i>Information and Protection of Privacy Act</i> , R.S.O. 1990, c.F.31, the personal information collected on this form is necessary to the proper administration of the <b>Ontario Senior of the Year</b> which is a program that is consistent with the mandate of the Ministry prescribed under s. 4 of the <i>Ministry of Citizenship and Culture Act</i> , 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- 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			

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