
Nova Scotia's Power of Positive Change Award Nomination Form

It is important that you read the criteria for this award carefully before completing this form. A single package containing the nomination form along with two reference forms can be mailed or dropped off to the address above.

For further details on the nomination process, see the award website powerofpositivechange.ca.

Please type or clearly print all information in ink.

Student Candidate's Information:

Name: (Mr./Ms.) _____ (First) _____ (Last) _____

Birth Date: Month: ____ Year: ____ School: _____ Grade: _____

Address: _____ Apt. # _____

City: _____ Province: _____ Postal Code: _____

Telephone #: () _____ - _____ Email Address: _____

Nominator's Information:

Name: (Mr./Ms.) _____ (First) _____ (Last) _____

Address: _____ Apt. # _____

City: _____ Province: _____ Postal Code: _____

Telephone #: () _____ - _____ Email Address: _____

Please describe, to a maximum of one page, a description of the candidate's contribution to promoting positive change in his/her school and/or community. You may use the reverse of this form or attach a separate page.

Signature of Nominator: _____

I consent to my child being nominated for the Nova Scotia Power of Positive Change Award. I understand that if my child is the recipient of this award, my child's name, school, grade, details from the submission describing my child's positive contributions, and photograph, will be used in public announcements, in newspapers, and on the Nova Scotia government website, when the award recipients are announced.

Signature of Student's Parent/Guardian: _____

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Name: (Mr./Ms.) _____ (First) _____ (Last) _____

School: _____ Grade: _____

Address: _____ Apt. # _____

City: _____ Province: _____ Postal Code: _____

Telephone #: () _____ - _____ Email Address: _____

Reference's Information:

Name: (Mr./Ms.) _____ (First) _____ (Last) _____

Type of Reference: Academic (Please specify) _____ Other (Please specify) _____

Address: _____ Apt. # _____

City: _____ Province: _____ Postal Code: _____

Telephone #: () _____ - _____ Email Address: _____

Signature: _____

Please describe, to a maximum of one page, a description of why you feel this candidate should receive the Nova Scotia Power of Positive Change Award. You may use the reverse of this form or attach a separate page.

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School: _____ Grade: _____

Address: _____ Apt. # _____

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Signature: _____

Please describe, to a maximum of one page, a description of why you feel this candidate should receive the Nova Scotia Power of Positive Change Award. You may use the reverse of this form or attach a separate page.