

THE QUEEN ELIZABETH II DIAMOND JUBILEE MEDAL

NOMINATION FORM * ALL FIELDS ARE MANDATORY UNLESS OTHERWISE STATED * PRINT CLEARLY

NOMINEE INFORMATION

Title(s)		
Last Name		Given Name(s)
Street Address		Apartment/Unit #
City/Town		Prov. Postal Code
Home Phone ()		Work Phone () extension
Cell Phone ()		E-mail Address
Gender ☐ MALE ☐ FEMALE	Language ☐ ENGLISH ☐ FRENCH	Date of Birth (mm/dd/yy) ____ / ____ / ____
Military? ☐ YES ☐ NO	Rank (Specify)	
Is the Nominee a Canadian citizen or Permanent Resident? YES ☐ NO ☐		Was the nominee alive as of February 6, 2012? YES ☐ NO ☐
Post-nominals (Optional)		
Current Position of Nominee (Optional)		
Field of Endeavour		

NOMINEE'S ACHIEVEMENTS - MANDATORY

Use this space to provide a brief summary of the nominee's achievements (up to 250 characters or 40 words)

NOMINATOR INFORMATION

Last Name		Given Name
Street Address		Apartment/Unit #
City/Town		Prov. Postal Code
Home Phone ()		Work Phone () extension
Cell Phone ()		E-mail Address
Relation to the Nominee		How long have you known the Nominee?

**Nomination forms that are not thorough and complete will NOT be considered.*

REFERENCES			
<i>List other references willing to vouch for your Nominee.</i>			
Full Name		Relation to Nominee	
Company/Organization			
Address			
Home Phone ()	Work Phone ()		extension
Cell Phone ()	E-mail Address		
Full Name		Relation to Nominee	
Company/Organization			
Address			
Home Phone ()	Work Phone ()		extension
Cell Phone ()	E-mail Address		
May we contact your listed references?		YES ☐	NO ☐
May we contact you for more information?		YES ☐	NO ☐

DISCLAIMER AND SIGNATURE	
I certify that the answers enclosed are true and complete to the best of my knowledge.	
Signature	Date

ALL FORMS MUST BE RECEIVED BY JUNE 30, 2012 AT THE FOLLOWING ADDRESS:

**Gordon O'Connor Constituency Office
101-240 Michael Cowpland Drive
Kanata, ON K2M 1P6**

**phone: 613-592-3469 fax: 613-592-4756
gordon.oconnor.a3@parl.gc.ca**

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