

Bikila Award Nomination Form

Entry Deadline is April 30, 2017



Bikila Award®
Promoting Excellence

Student Nominee

This section is for Students Nominee.

Student Nominee First Name:

Last Name:

Phone:

Email Address:

Address:

City:

Province / State:

Postal / Zip Code:

Country:

Name of School/Collage/University your nominee is attending:

Grade/Year:

Comments about your nominee:

Professional Nominee:

This section is for Professional Nominee.

First Name:

Last Name:

Phone:

Email:

Address:

City:

Education:

Profession:

Position / Title:

Comments:

Nominator

Please fill out this section about yourself.

Nominator First Name:

Last Name:

Phone:

Email Address:

Address:

City:

Province / State:

Postal / Zip Code:

Country:

Relationship to nominee:

SUBMIT ENTRIES:

Before April 30, 2017.

AWARDED NIGHT:

To be announced.

Mailing Address:

C/O **Bikila Award**, 2009 Danforth Avenue,
Toronto, Ontario, M4C 1J7

Email:

nomination@bikilaaward.org

Please attach additional documents to support your nominations.