

## $\underline{\textbf{NOMINATION FORM}} \hspace{0.2cm} (send completed form to awards@bcwle.ca)$

Award Category		Has the ca	andidate been previous	y nominated, if so, wher	1?
Candidate Name, Rank, Badge number (if o	civilian pleas	e indicate)	Department		Years of Service
Address	Work Phor	ne	Cell Phone	Email	
Candidate Waiver:					
I, confirm I give I confirm all information and supporting do not breach privacy rights to those involved BCWLE to print, publish and advertise my number of printed information pamphlets. I confirm	ocumentation d, nor will it name, photo	n is accura jeopardize and a brief	ate and true to the best e a current/ongoing pol summary of my accom	of my knowledge. I con ice investigation or crim plishments on their webs	inal trial. I give consent to the site, social media platforms and
Print Name		Signature			Date
Candidate: Please provide a brief persona words	l summary a	nd photog	raph of yourself that ca	an be included BCWLE pr	roductions. Maximum of 250
		Upload p	photo or click and drag		



## **NOMINATOR**

Please provide information supporting your andidate's involvement, and the outcome. P			ow. Include details re	egarding the situation, th
ease provide two references for the above i	information			
ame, Rank, Badge	Phone	e and Email		
ame, Rank, Badge	Phone	e and Email		
ubmitted by (Name, rank, badge)	Phone	Email		
<u>,</u> to submit this form an ffect an ongoing, current investigation, crimi			confirm the disclosure	of this information will no
rint Name	Signature		Da	te

To submit your nomination, send a copy of your completed form to  $\underline{awards@bcwle.ca}$ . Nomination deadline is January 31st, 2022.



## **DO NOT PRINT BELOW THIS LINE (FOR OFFICE USE ONLY)**

Date Received		F	Received	by					
Recommendations from BCWLE Advisory Members									
Does the Candidate meet requirements? Yes or No (if no, please provide brief reason)									
BCWLE President notified. Yes or	· No	Date of notification		Notified by (Name)					
Device i resident notined. Tes or		Date of Hotimeation		Notified by (Name)					
Outcome	Candidate	notified. Yes or No	Method	l of notification		Date			
BCWLE President Acknowledgme	ent				Date				
NOTES									
INOTES									