



Official Entry

Form

Category entered (please check):

- | | |
|--|---|
| <input type="checkbox"/> Safety Award of Excellence – Organization | <input type="checkbox"/> Special Award for Small Business |
| <input type="checkbox"/> Safety Award of Excellence – Individual | <input type="checkbox"/> Individual Safety Champion |
| <input type="checkbox"/> Employer Safety Champion | <input type="checkbox"/> Safety Transformation |
| <input type="checkbox"/> Employer Return to Work Champion | <input type="checkbox"/> Health and Safety Educator |

Summary of Application: In a sentence or two, summarize why this nominee deserves this award. (Maximum 50 words):

Nominee Information *(Details on the person or organization being considered for the award. For individual nominees, please indicate if s/he is a safety professional and their credential, e.g. CRSP, CSSE, CHSE, etc.)*

Employer name:	<i>For individual nominees</i>
Workplace Address:	Name:
Town/City/Community:	Position:
Postal Code:	Time with employer:
Telephone:	Is individual a safety professional? (Y/N)
Fax:	Safety Credentials (e.g. CRSP, CSSE, CHSE)
Email Address:	
Website:	
Brief description of employer operations:	

Nominator Information *(Name of person submitting this entry form. You may nominate yourself.)*

Name:	
Employer:	Telephone:
Address:	Fax:
Town/City/Community:	Email Address:
Province:	Mobile phone:
Postal Code:	

How did you hear about the Mainstay Awards?

- Ad
 News Media
 Email
 Industry group/association
 Direct mail
 WCB Website
 Union
 Other _____

I submit that the information contained in this application is accurate and complete. I agree to the judging process of the Mainstay Awards, including verification of safety performance and site visits.

Signature: _____ Date: _____