



## Application Detail: Summary of Initiative

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### Nominee Information:

Employer name:

Workplace Address:

Town/City/Community:

Postal Code:

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       |

### Entry Summary:

*Please provide a summary of the initiative, activity, or program that led to this application. In general, this is the summary of why this organization or individual deserves this award. A separate summary must be included for each category in which you are applying. Please keep your summary under 500 words.*