COFAS Above & Beyond Award

**NOMINATION FORM**

**Nominee’s name**:

**Faculty association/provincial or national office**:

**Position title**:

**Name of person(s) making nomination**:

As a member of COFAS, I would like to nominate my colleague to receive the **Above & Beyond Award.** I believe this individual has gone above and beyond their normal job responsibilities on behalf of their organization, community or COFAS affiliation for the following reasons:

*(Please give specific examples of how this nominee goes above and beyond. Please limit your notes to one page)*

*\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

*Please submit the nomination form by email to the agenda coordinator(s) for the next conference at least one month prior to the conference.*

*COFAS members can make more than one nomination. The nominations will be reviewed by a volunteer committee and those who are selected to receive awards will be notified prior to the conference. A symbol of recognition will be given to those who receive awards. One does not have to be present at the group dinner to receive their symbol of recognition.*