



Hemophilia Ontario

We're All Related By Blood

Hemophilia Ontario strives to improve the health and quality of life for all people affected by inherited bleeding disorders, and to find a cure. Volunteers are at the heart of our mission. Every day, across Ontario, they breathe life into this mission. Through their work and commitment, we all come closer to our vision of a world free of the pain of inherited bleeding disorders.

## PRESIDENT'S AWARD

### CALL FOR NOMINATIONS

Hemophilia Ontario is home to dedicated innovators and leaders who are committed to helping the organization reach its mission. The core values of trust, respect and collaboration play out every day at Hemophilia Ontario. These values extend beyond the office walls in the countless hours volunteers give to helping others in the community.

Hemophilia Ontario invites nominations for the *President's Award*. This Award recognizes a current or past Hemophilia Ontario President, Hemophilia Ontario Board Member, Committee Chair or Regional Chair. The recipient, if any, will be selected by the president in his/her sole discretion, after a review of nominations and the recommendation of the Awards Committee.

**Purpose:** The President's Award provides recognition of an individual who made an outstanding contribution to Hemophilia Ontario through:

- Leadership
- Outstanding professionalism
- Contributions enhancing the reputation of Hemophilia Ontario
- Distinguished service at the local and /or provincial level

*\* Please send completed Nomination Forms attention Awards Committee to:*

**By Mail:** Hemophilia Ontario  
4711 Yonge Street, Suite 10100, 10th Floor, Toronto, ON M2N 6K8  
**By FAX:** 888-958-0307 OR  
**By Email:** [sturner@hemophilia.on.ca](mailto:sturner@hemophilia.on.ca)

## NOMINATION FORM

Name of Nominator: \_\_\_\_\_

Preferred method of contact (phone, email details):  
\_\_\_\_\_

**NOMINATION REQUIREMENTS:** Your nomination will be the only information available to the awards committee to describe how the nominee has worked to advance the mission of Hemophilia Ontario. Please provide accurate and complete information in all identified areas.

**CONFIDENTIALITY:** Please ensure that you keep this nomination confidential. All awards have limited numbers of recipients and it could be hurtful and disappointing for a nominee should they not receive an award.

*\*Deadline for nominations is **March 16, 2018**. This award will be presented during the Annual General Meeting on April 14, 2018 .*

## NOMINEE DETAILS

*Note: The "Name of Nominee" is the name that will be used on any communication, certificate or award.*

Name of Nominee: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Years of Involvement: \_\_\_\_\_ Position held: \_\_\_\_\_

## BACKGROUND

- 1) Please describe the nominee's outstanding contributions to Hemophilia Ontario.

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- 2) Please provide specific examples of how the nominee's leadership or contributions improved Hemophilia Ontario.

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- 3) Please explain how the nominee's actions enhanced the reputation of Hemophilia Ontario.

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- 4) Provide any additional information pertaining to the nominee's achievement and contribution, particularly their overall impact, and how it was beyond the normal requirements of their level of Society involvement. Supporting documents, such as newspaper clippings, photos, etc. may accompany this nomination.

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