



Ontario Health Libraries Association

Awards Nomination Form

As members in good standing of the Ontario Health Libraries Association (OHLA), we hereby nominate the person listed below as a candidate for consideration for the (*please select the award*):

- Award of Outstanding Achievement
- Lifetime Achievement Award
- Mentor Coaching Award
- Solo Librarian Award
- Student Participation Award
- Conference Registration Award

Nominee's Name: _____

Nominee's Employer: _____

Telephone: _____

Email: _____

Provide specific examples demonstrating why the nominee should win the award

Include the nominee's curriculum vitae (*if possible*) with your submission.

Your contact information is required so we may contact you as nominator:

Name: _____

Telephone: _____ Email: _____

Send completed nomination form and accompanying CV to: ohla.inquiries@gmail.com

*** In the email's *Subject* field, enter **OHLA Award Nomination**.

Thank you!