

Ontario Volleyball Association

Mike Bugarski Male Coach of the Year

Nomination Form

Submission Deadline: All nominations must be received by the OVA Office by
Sunday March 3rd 2024 at 11:59 PM.



First Nominator Contact Information

Last Name:	<input type="text"/>	First Name:	<input type="text"/>		
Affiliation with OVA:	<input type="text"/>				
Mailing Address:	<input type="text"/>				
City:	<input type="text"/>	Province:	<input type="text"/>	Postal Code:	<input type="text"/>
Email Address:	<input type="text"/>	Phone Number:	<input type="text"/>	Signature:	<input type="text"/>

Second Nominator Contact Information

Last Name:	<input type="text"/>	First Name:	<input type="text"/>		
Affiliation with OVA:	<input type="text"/>				
Mailing Address:	<input type="text"/>				
City:	<input type="text"/>	Province:	<input type="text"/>	Postal Code:	<input type="text"/>
Email Address:	<input type="text"/>	Phone Number:	<input type="text"/>	Signature:	<input type="text"/>

Nominee Contact Information

Last Name:	<input type="text"/>	First Name:	<input type="text"/>		
Affiliation with OVA:	<input type="text"/>				
Mailing Address:	<input type="text"/>				
City:	<input type="text"/>	Province:	<input type="text"/>	Postal Code:	<input type="text"/>
Email Address:	<input type="text"/>	Phone Number:	<input type="text"/>		

Detailed Nominee Information

Please outline all relevant Coaching involvement in OVA programs (Club programs, Regional and Provincial Team programs) by the above listed nominee.

Please include volleyball CV and highlights of accomplishments by the above listed nominee.

Nominee Eligibility & Selection Criteria Checklist

Affiliated Club and Team(s):

Age groups coached over the past season(s):

Has not received this award within three consecutive years:

☐

Second nominator has included contact information for the committee?

☐

Minimum fully certified NCCP Level 2 Coach (recommended Level 3 Coach):

☐

Registered male Coach in good standing with the OVA?

☐

Resident of Ontario?

☐

Police Check and Vulnerable Sector Screening on file with the OVA and completed within the last three (3) years?

☐

Digital head and shoulders photograph of the nominee (jpeg format with 300 dpi)?

☐

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To submit your nomination, please complete this Nomination Form and submit by email to awards@ontariovolleyball.org. An incomplete nomination form will not be accepted. Be sure to submit a head shot photo of the Nominee by email- Subject: AWARDS and Nominee's name.

Questions about Nominations? Contact Mylene Andrade, Membership Services Coordinator, at awards@ontariovolleyball.org or 416.426.7132.