Ontario Volleyball Association Achievement Award Nomination Form



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

Nominator Contact Information		
Last Name: First Name:		
Affiliation with OVA:		
Mailing Address:		
City: Province: Postal Code:		
Email Address: Phone Number: Signature:		
Nominee Contact Information		
Last Name: First Name:		
Affiliation with OVA:		
Mailing Address:		
City: Province: Postal Code:		
Email Address: Phone Number:		
Detailed Nominee Information		
Please outline all relevant volunteer involvement in the sport and performance as an athlete, Coach, Official, and/or administrator in Ontario.		

Detailed Nominee Information Continued		
Please list all relevant contributions to volleyball in Ontario over a minimum of 10 years by the above listed nominee.		
Nominee Eligibii	ity and Selection Criteria Checklist	
Club Affiliation?		
Currently is/was a rec	gistered OVA member in good standing with the OVA during their years of service?	
Ontario resident?		
10 + years of service?		
Only received this aw	vard once in their lifetime?	
Previously received t	he Recognition Award by the OVA?	
Attached Volleyball C	TV?	
Police Check/Vulnera	ble Sector Screening on file with the OVA and completed within the last three (3) years (if a current member)?	
Digital head and sho	ulders photograph of the nominee (jpeg format with 300 dpi)?	

Submission Deadline: All nominations must be received by the OVA Office by Sunday March3rd, 2024 at 11:59 PM.

To submit your nomination, please complete this Nomination Form and submit by email to awards@ontariovolleyball.org. An incomplete nomination form <u>will not</u> be accepted. Be sure to submit a <u>head shot</u> 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.