

## Hilton Mierau Award of Excellence in Off-Campus Learning

This award recognizes outstanding Off-Campus Coordinators who inspire students to explore careers, demonstrates innovation in promoting programs, and know the industries involved inside and out.

### Nominator Information (to be completed by the person submitting nomination)

First Name

Last Name

Address Line 1

Address Line 2

City

Provinces

Country

Postal Code

Phone Number

Work Phone

Ext.

Nominator's Email Address \*

Organization/Company

Relationship to Nominee

Preferred method of contact

- Main Phone  Work Phone  E-mail

### Nominee Information (information about the individual being nominated)

She/He is a:

- Teacher  
 Curriculum Coordinator  
 School-based Administrator  
 Department Coordinator

First Name

Last Name

Address Line 1

Address Line 2

City

Provinces

Country

Postal Code

Phone Number

Work Phone

Ext.

Nominee's Email Address \*

Preferred method of contact

Main Phone  Work Phone  E-mail

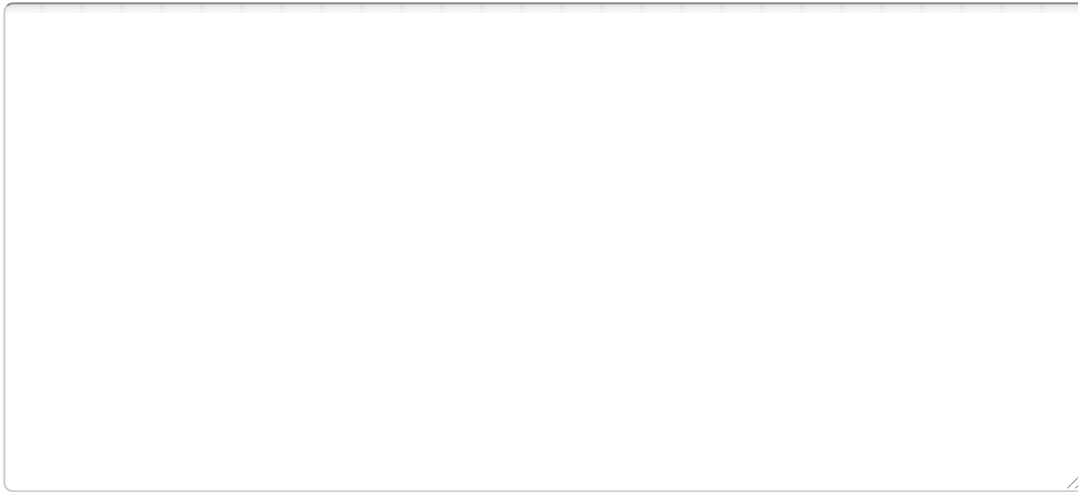
School Name (if applicable)

School City/Town

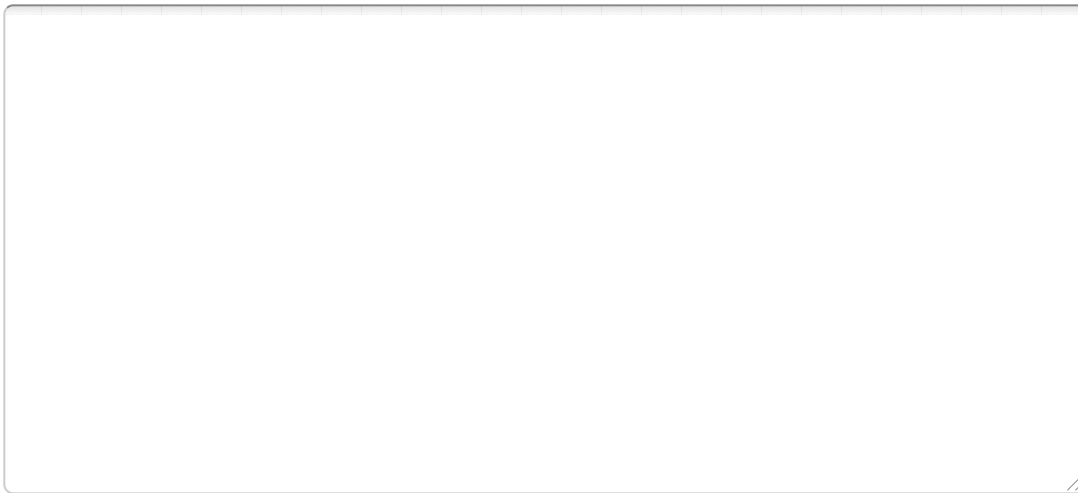
School Board/Authority

**Mentor Nomination Support Commentary Form (must be completed by the nominator.)**

Describe how the Off-campus Coordinator demonstrates **innovation in promoting and knowledge of the industries** involved in off-campus programming. \*



Describe how the Off-campus Coordinator **inspires students** to take new challenges to reach their full potential. \*



Describe how the Off-campus Coordinator utilizes CAREERS for off-campus success and provides employers with support and guidance. \*

Tell us why you think the Nominee deserves to be recognized. *Provide examples to support your application.* \*

**Supporter Information** (each nomination must be accompanied by a second letter of support different from the nominator.)

Supporter is a:

Student/Parent  School/School Administrator  Employer

First Name

Last Name

Letter of Support File Upload

No file chosen

## Mentor Nomination Consent Form

### **NOMINATOR'S CONSENT (to be completed by the person submitting the nomination)**

- I certify that the nominee has agreed to be nominated for the Hilton Mierau Award of Excellence in Off-Campus Learning.
- I certify that I, the nominator, consent to participate in all awards-related events and to allow use of the included information and photographs in any award-related promotion by CAREERS: The Next Generation.
- I certify that the applicable eligibility criteria has been met and the information within this nomination is current and accurate.

### **I permit CAREERS: The Next Generation to disclose my contact information to:**

- The nominee
- The nominee's organization of work
- The intern's school and school board authority
- Media (print, television, radio and internet)

Submit

[Contact Information](#)