Citizen Appreciation Program Nomination Form



Nominator Information (Your Information)				
Name:				
Address:				
Phone:			Email:	
Nominee Inform	nation	n (Person/Organization	being nominate	ed)
Name:				
Physical Address	::			
Mailing Address:				
Phone:			Email:	
Is the Nominee aware of this nomination? \Box Yes \Box No Please provide a brief description of the reason the Nominee should be recognized. Include details on the activities, including location and duration.				
I certify, to the be	est of	my knowledge, that the	information pr	ovided in this nomination is correct.
Signature of Nominator:				Date:

FREEDOM OF INFORMATION AND PROTECTION OF PRIVACY STATEMENT

The personal information on the Citizen Appreciation Program is being collected under authority of Section 33(c) of the Freedom of Information and Protection of Privacy (FOIP) Act. Brazeau County will use the aggregate data for program planning, publication, and evaluation. All personal information will be protected in accordance with the privacy provision of the FOIP Act. If you have any questions about the application or questions about the collection, use or disclosure of your personal information, please contact the FOIP Coordinator at Brazeau County at 780-542-7777.