
POGO RECOGNITION AWARDS

NOMINATIONS FORM & REQUEST FOR SUPPORTING DOCUMENTS

Full Name of Nominee (individuals or groups):

Mailing Address:

Telephone Number: _____

Fax Number: _____

E-mail address: _____

Childhood cancer organization(s)/institution(s) with which their work is affiliated:

Length of time in which the overall contribution has been made: _____

Nominated by: _____

Mailing Address:

Telephone Number: _____

Fax Number: _____

E-mail address: _____

Signature: _____

Length of time you have known the nominee: _____

Relationship to Nominee (e.g. patient, colleague, etc.): _____

Award applied for:

- POGO Companion Award
- POGO Valued Contribution Award
- Friends of POGO Award

Each nomination package must include:

- Completed and signed nomination form
- 2 Letters of support (one to be provided by the nominator, PLUS one other), each clearly stating the award applied for AND specifically addressing the qualifications of the candidate, matched to the criteria of the award nominated for (please refer to award descriptions included in the POGO RECOGNITION AWARDS - CALL FOR NOMINATIONS)
- Current curriculum vitae of nominee

Deadline:

Nomination packages must be received not later than 12:00 noon on Friday, September 17, 2010

Clearly label: PRIVATE & CONFIDENTIAL, and mail, fax or email nomination package to:

Helen Craig, Administrative Assistant
Pediatric Oncology Group of Ontario
480 University Avenue, Suite 1014
Toronto, Ontario M5G 1V2
Tel: 416-592-1232 x230 Fax: 416-592-1304 Email: hcraig@pogo.ca
