

Category entered (please check):

- | | |
|--|---|
| <input type="checkbox"/> Safety Award of Excellence – Organization | <input type="checkbox"/> Special Award for Small Business |
| <input type="checkbox"/> Safety Award of Excellence - Individuals | <input type="checkbox"/> Individual Safety Champion |
| <input type="checkbox"/> Employer Safety Champion | <input type="checkbox"/> Safety Transformation |
| <input type="checkbox"/> Employer Return to Work Champion | |

Summary of Application: In a sentence or two, summarize why this nominee deserves this award.
(Maximum 50 words):

Nominee Information <i>(Details on the person or organization being considered for the award)</i>	
Employer name:	<i>For individual nominees</i>
Workplace Address:	Name:
Town/City/Community:	Position:
Postal Code:	Time with employer:
Telephone:	
Fax:	
Email Address:	
Website:	
Brief description of employer operations:	

Nominator Information *(Name of person submitting this entry form. You may nominate yourself.)*

Name:		
Employer:	Telephone:	
Address:	Fax:	
Town/City/Community:	Email Address:	
Province:	Mobile phone:	
Postal Code:		

How did you hear about the Mainstay Awards?

- Ad
 News Media
 Email
 Industry group/association
 Other: _____,
- Direct mail
 WCB Website
 Union

I submit that the information contained in this application is accurate and complete. I agree to the judging process of the Mainstay Awards, including verification of safety performance and site visits.

Signature: _____

Date: _____