



HONOURED EDUCATOR NOMINATION FORM

Name of retired educator you are nominating for Honoured Educator Award:

Your Name and Phone Number:

Please list below in point form the reasons why, in your opinion, the person you have nominated is worthy of a Medicine Hat Public School Division Honoured Educator Award.

- 1) Examples of superior teaching performance and/or District leadership as a school administrator.

- 2) Examples of special service to education.

- 3) Examples of service to the community.

- 4) Other relevant information.
