BROCKVILLE COLLEGIATE INSTITUTE HALL OF EXCELLENCE NOMINATION FORM



Please make every effort to provide all information requested on this form.

It is required by the *selection committee* in making their selection of *inductees*.

Incomplete forms could adversely affect the committee's selection of a *nominee*.

If this form does not provide sufficient space for your comments, please attach additional pages.

DATE				
Nominator				
Name:		Address:		
Phone:				
e-mail address:				
your relationship to Nominee:				
	NOM	TATATA		
Name:		Address:		
		Address.		
Phone:				
e-mail address:				
Years attending BCI:				
Years attending other Secondary please supply name of school)	ary Schools if applica	ble (
Academic achievements while attending BCI	е			
Athletic achievements while attending BCI Please specify how many years the nominee participated in each athletic activity				
Artistic achievements while attending BCI Please specify how many years the nominee participated in each artistic activity				
Employment upon leaving BCI				

Please supply a brief BIOGRAPHY of the nominee, including any or all <u>awards</u> , <u>recognitions</u> and <u>significant dates</u> within the following areas where applicable.				
post secondary education				
DI EACE CDECI			nity involvement / volunteerism	
Activity		ear <u> </u>	ominee was involved with each community activity Comments	
		accomplishments	in chosen occupation	
			all into any of the above categories. This may include tic or Artistic accomplishments of the nominee since	
graduating from	BCI.		-	
Area of achievement:	brief descrip	otion of nominee's	s achievement and how recently these achievements occured	

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Please send a hard copy of the completed Nomination Form to:

The Principal

Brockville Collegiate Institute

The Principal
Brockville Collegiate Institute
90 Pearl Street East
Brockville, ON
K6V 1P8