



BCCPAC Life Membership Award Nomination Form

Please mail/fax the completed form with attachments to the
BCCPAC office by no later than **March 1, 2009**.

NOMINEE:

Name: _____

Mailing Address: _____ City: _____

Postal Code: _____ Telephone: _____ Fax: _____

Email Address: _____

PAC Name: _____ School District Number: _____

NOMINEE:

Consent for the Primary Nominating PAC to seek 5 additional references

Name: _____ Signature: _____

Primary Nominating PAC/DPAC:

Please note that PAC Executive Members' signatures are required to confirm the PAC's nomination

PAC/DPAC Name: _____ School District Number: _____

Contact Name: _____ Position: _____

Telephone: _____ Email: _____

Signature: _____

The support of five BCCPAC member PACs and/or DPACs are needed to qualify for the award:

1. Supporting PAC / DPAC:

PAC/DPAC Name: _____ School District Number: _____

Contact Name: _____ Position: _____

Telephone: _____ Email: _____

Signature: _____

2. Supporting PAC / DPAC:

PAC/DPAC Name: _____ School District Number: _____

Contact Name: _____ Position: _____

Telephone: _____ Email: _____

Signature: _____

3. Supporting PAC / DPAC:

PAC/DPAC Name: _____ School District Number: _____

Contact Name: _____ Position: _____

Telephone: _____ Email: _____

Signature: _____

4. Supporting PAC / DPAC:

PAC/DPAC Name: _____ School District Number: _____

Contact Name: _____ Position: _____

Telephone: _____ Email: _____

Signature: _____

5. Supporting PAC / DPAC:

PAC/DPAC Name: _____ School District Number: _____

Contact Name: _____ Position: _____

Telephone: _____ Email: _____

Signature: _____

Additional Items required for nomination submission:

- Completed Nomination Form
- Maximum 500 word summary nominee's background with evidence to support the criteria
- 3 letters of support, two from parent and another from a student, administrator, educator or trustee

*Please be advised that this Award is open to BCCPAC members only.
The completed form with attachments must be received by the BCCPAC office,
either by mail or fax, by March 1, 2009.*

Please mail or fax the BCCPAC Life Membership Award
Nomination Form to:

Suite #350, 5172 Kingsway
Burnaby, BC V5H 2E8

Fax: 604-687-4488