

## **MLACAK AWARD SUBMISSION FORM**

Date of s	ubmission:
1. Name	and home address of the <b>Nominator</b> :
Name:	
Street:	
	Province: Postal Code:
Email:	Telephone:
2. Name	and home address of the <b>Nominee</b> :
Name:	
Street:	
City:	Province: Postal Code:
Email:	Telephone:
minimu	ees for the Mlacak Award must have been CPF members in good standing for a m of 5 consecutive years and have made substantial contributions to CPF Ontario Chapter and/or provincial level. Describe responsibilities, positions held, etc.

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5455 g. 15 4 5.1.5	, promo or are rom	arra miorado ar	ny other information of interest.

Please email all forms and letters of support to info@on.cpf.ca.

Awards Committee
Canadian Parents for French (Ontario)
103-2055 Dundas St. East
Mississauga, ON L4X 1M2