

| For office use only | |
|---------------------|--|
| Date received: | |

2023 MANITOBA INDIGENOUS YOUTH ACHIEVEMENT AWARDS Nomination Form Please PRINT clearly

| Award CategoryDate received | |
|--|---|
| Name of Individual Nominated | <u></u> |
| DOB (DD/MM/YYYY) | Age |
| Phone Email | |
| AddressCity/Town | Postal Code |
| I certify that all information on documents submitted with this applications knowledge. I understand that if I am a recipient of an award, my picture by the Manitoba Indigenous Youth Achievement Awards for promotional | e and biographical information may be used |
| Nominee Signature Date | e |
| Nominating Person/Organization | Phone |
| AddressCity/Town | Postal Code. |
| Email | |
| NOMINEE INFORMATION (written by nominee) Please provide the following information. The outline below is a guide. Please have the information typewritten. OUTLINE (350 words maximum) Introduction Age, date of birth, and place of birth Nation (First Nation, Metis, Inuit) Where childhood was spent or home community | Application Check List: ** Please refer to the nomination guide Before you send in your application: Sign and date this form. Attach a typewritten copy of your nominee information (introduction, education, personal biography). Attach your nominator's letter. * |
| Education Highest grade attained Areas of interest Plans for the future | Attach two letters of support from references (please see guide) Attach transcripts if applicable |
| Personal Biography (Written by the Nominee) ☐ In this section, highlight some of the reasons why you feel that you deserve this award. Include your beliefs, ideas, dreams and role models. | Include supporting documentation, newspaper clippings or samples of your work. (Optional) Note: Please do not send originals. |
| □ Include a personal quote to give a message to Indigenous youth. DEADLINE FOR NOMINATIONS: October 13th, 2023 4:30 PM | *Letter of nomination and references may be sent separately, but must be received by the nomination deadline in order for your application to qualify. |
| NO FAXES WILL BE ACCEPTED Email/mail/drop off completed applications to: | We appreciate the time and effort for |
| Amber Brown | submitting your Nomination. Only successful |

recipients will be contacted.

MIYAA RECIPIENT: YES/NO

PLEASE INDICATE IF YOU ARE A FORMER

amber.brown@7oaks.org Website: www.miyaa.ca

1330 Jefferson Avenue

Winnipeg, Manitoba, R2P 1L3