



**Canadian Deafblind Association
Andrew Love Memorial Award
for Intervenor of the Year**

Name of Nominee: _____ **Email:** _____

Address: _____ **City/Prov:** _____

Postal Code: _____ **Tel:** _____

ELIGIBILITY: Presented to a special Intervenor who displays outstanding skills. The successful candidate will be a dedicated and compassionate individual who has devoted time and effort to enhance the quality of life of a person who is Deafblind.

NOMINATION PROCEDURE: Persons interested in nominating an individual to receive this award should submit this completed form along with a detailed summary that outlines the nominee's ability to enhance the quality of life of a person who is Deafblind. The summary should paint a picture of an Intervenor who has outstanding intervention skills that are exemplified through a philosophy of "doing with, not for". The nominee will have heightened community awareness of the needs of persons who are Deafblind by demonstrating a degree of professionalism that goes above and beyond their job description.

Supporting documentation for the nominee's candidacy is encouraged, including examples of school, family and community special initiatives; additional letters of support; as well as photos and input from the individual with whom the Intervenor works.

Nominee Signature: _____

I hereby affirm that the nomination information is accurate. I recognize that providing false or misleading information may jeopardize this nomination.

Nominator: _____ **Tel:** _____

Email: _____

Nominator Signature: _____

Please forward completed Nomination Form to:

CDBA National Executive Director

Email: tmcfadden@cdbanational.com

Mail: 1860 Appleby Line, Unit 14, Burlington ON L7L 7H7