Nova Scotia Forestry Hall of Fame

NOMINATION FORM

Thank you for taking the time to make a nomination to the Nova Scotia Forestry Hall of Fame. Information should be accurate and complete. If the space provided is not sufficient, please use additional sheets and attach them to this form. Please type or print clearly.

1.	Full Name of Nominee: (Nickname, if any)	
2.	Place of Birth:	
	Date of Birth:	
3.	Current Address:	
3.	Current Address.	
4.	If deceased, date:	
	Location:	
5.	Dates of Residency in Nova Scotia:	
6.	Family Information:	Spouse's Name:
		Children:
7.	Education (with dates):	Public School:
		High School:
		Post Secondary

Special Awards:					
Additional informatio	on that you c	onsider to b	e important		
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Names and Addresses of Persons Making the Nomination

Name:	
Address:	
Telephone	
Name:	
Address:	
Telephone	
relephone	
Name:	
Address:	
Telephone	

11. Please attach two letters that support the nomination. One of the letters must be from either a Forest Technician or Forester.

The Selection Committee of the Registered Professional Foresters Association of Nova Scotia (RPFANS) and/or the Nova Scotia Forest Technicians Association may research any information that is provided. Please send completed forms to:

Cheryl Rudderham Forestry Hall of Fame P.O . Box 68 Truro, .N.S B2N 5B8

rudderca@gov.ns.ca