



Seventh Annual
Newcomer
RECOGNITION
awards

School Application

Submission Deadline: September 23, 2019

Prior to completing nomination form, please read the Rules and Regulations

School Contact Information

| | |
|------------------------------|-----------------|
| Name of School: | |
| Contact Name: | |
| Street Address: | |
| City, Province, Postal Code: | |
| Work Phone/Extension: | E-mail Address: |

Nominee Contact Information

| | |
|------------------------------|-------------|
| First Name: | Last Name: |
| Street Address: | |
| City, Province, Postal Code: | |
| Home Phone: | Work Phone: |
| E-mail Address: | |

Please send your completed application form to:

Fax: 705-725-9539 Attention: Robin Griffiths

Email: sclip@simcoe.ca



School Application Form

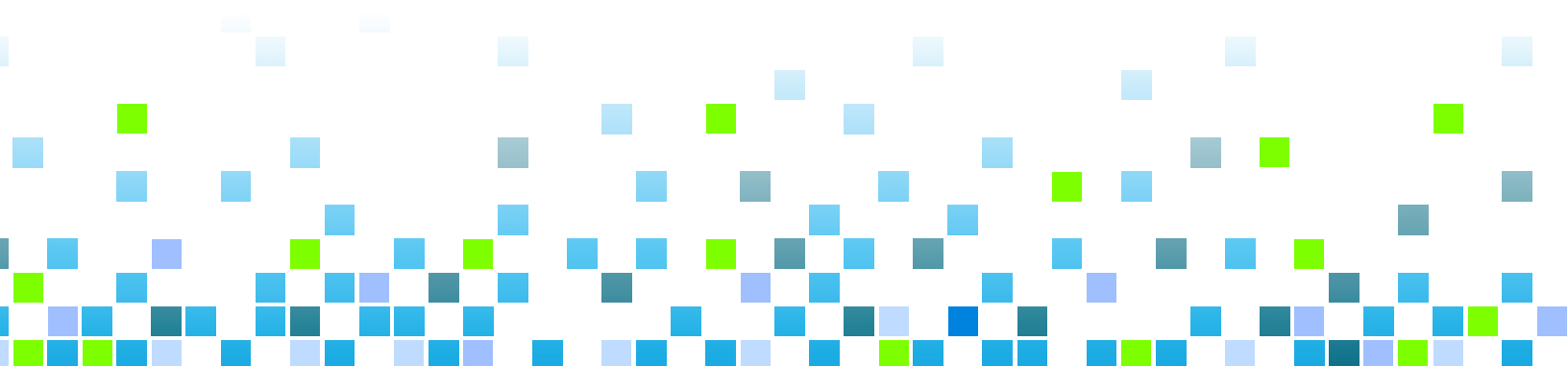
Explain in detail how the school fulfills the award criteria.

Give detailed examples wherever possible.

How has the work of the school contributed to student success?

Please give examples.

What strategies, steps, or innovative approaches are used by the school to enhance opportunities for newcomers?





How does the work of the nominee fit in with one or more of the following themes?

Give examples.

*For more information on each of the following themes, please refer to the County of Simcoe Local Immigration Partnership Community Settlement Strategy at www.simcoe.ca/dpt/ss/ccs/lip

Readiness

Develop or enhance services in Simcoe County (e.g. clubs, organizations, committees) to include cultural diversity and cultural awareness.

Opportunity

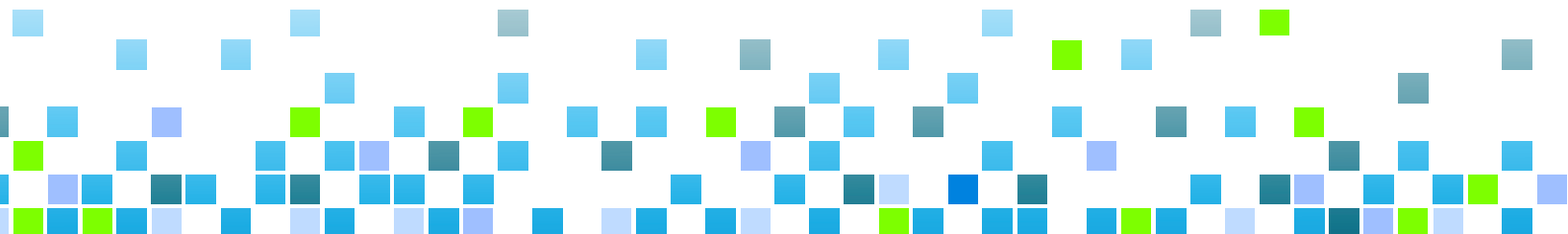
Improve or promote career and employment opportunities for immigrants in Simcoe County.

Celebrate

Support the development of multiculturalism through festivals, activities, and events, in Simcoe County communities or organizations.

Inspire

Empower immigrants to contribute to local leadership or an immigrant who is a leader in the community*
*community defined as an area (city, town, or neighbourhood), or a group of people with same interests or commonalities (ex. race, religion, professional network).





Nominator Supporters

Please provide two individuals who support the application

| | |
|------------------------------|-------------|
| First Name: | Last Name: |
| Street Address: | |
| City, Province, Postal Code: | |
| Home Phone: | Work Phone: |
| E-mail Address: | |

| | |
|------------------------------|-------------|
| First Name: | Last Name: |
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| City, Province, Postal Code: | |
| Home Phone: | Work Phone: |
| E-mail Address: | |

Agreement and Signature

By submitting this nomination form, I accept the Rules and Regulations governing participation in the Simcoe County Local Immigration Partnership Newcomer Recognition Awards, and agree to abide by the Rules and Regulations.

| | |
|-------------|------------|
| First Name: | Last Name: |
| Signature: | Date: |

**Selected nominees will be contacted the week of October 7, 2019
following the decision of the selection committee.**

