



## British Columbia Mine Safety Awards

### Chief Inspector of Mines' Recognition Award

#### **How to submit a nomination**

#### **Complete the standard cover letter**

Submission date	Fill in the date that you are submitting the nomination
Nominee(s)	Fill in the name or names of the people you are nominating. If it is a program that you are nominating then put in the name of the program and the name of a contact person for the program.
Mine name	Fill in if applicable.
Mine number (if known)	Fill in if applicable and if known
Category or statement regarding reason for award nomination	Provide the reason why you are nominating this person, group, or program. The details will be provided in the nomination submission (no more than 2,500 words, double spaced).
Date of safety act (if applicable)	Fill in if applicable
Nominated by	Fill in your name. You can nominate yourself or others.
Contact information of nominator	We need contact information from the nominators so that we can contact you if we require more information or clarification.
Telephone:	
E-mail:	
Mailing Address:	
Relationship to nominee	Fill in

#### **Prepare a nomination submission**

The nomination submission should be brief and no more than 2,500 words. The nomination submission should be in an easy-to-follow format. Any pictures or figures that are relevant to the nomination should be included and may be used during an awards presentation.

The nomination submission should describe the program or act in such detail that the award adjudicators can make a recommendation on award approval.

**Submit the cover letter and nomination submission to the Chief Inspector of Mines' Office, PO Box 9320 Stn. Prov Govt, Victoria, BC V8W 9N3 or [mine.safety@gov.bc.ca](mailto:mine.safety@gov.bc.ca).**



## British Columbia Mine Safety Awards

### Chief Inspector of Mines' Recognition Award Cover Letter

Submission date: \_\_\_\_\_

Nominee(s): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Mine name: \_\_\_\_\_

Mine number (if known): \_\_\_\_\_

Category or statement regarding reason for award nomination: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Date of safety act (if applicable): \_\_\_\_\_

Nominated by: \_\_\_\_\_

#### Contact information of nominator

Telephone: \_\_\_\_\_

E-mail: \_\_\_\_\_

Mailing Address: \_\_\_\_\_  
\_\_\_\_\_

Relationship to nominee(s): \_\_\_\_\_  
e.g., coworker, supervisor, mine manager, spouse, family member