



## The Pendle Award for Philanthropy

Presented by the Community Foundation of Mississauga  
Nomination Form

### NOMINEE INFORMATION

Mr. Ms. Mrs. Hon. Dr. Miss Name:

Home address:

City: Prov.: Postal Code:

Home telephone #: Cell:

email:

Business/Organization name:

Title/position

Business address:

City: Prov.: Postal Code:

Business telephone #:

### NOMINATOR INFORMATION

Mr. Ms. Mrs. Hon. Dr. Miss Name:

Contact address:

City: Prov.: Postal Code:

Contact telephone #: Cell:

email:

### REFERENCES

Please provide two references that are familiar with and can speak to the scope of the nominee's activities relevant to this nomination. Please advise these references that they may be contacted.

1. Name: \_\_\_\_\_ Phone: \_\_\_\_\_ email: \_\_\_\_\_

2. Name: \_\_\_\_\_ Phone: \_\_\_\_\_ email: \_\_\_\_\_

Do you have the permission of the nominee to submit this nomination? Yes No

May we contact you if we have further questions about this nomination? Yes No

