

Community Partner Award

N L C S A



NEWFOUNDLAND
& LABRADOR
CONSTRUCTION
SAFETY
ASSOCIATION

This award serves to recognize an organization or individual who promotes health and safety awareness in the community through volunteering time and efforts and/or involvement in constructive partnerships and community initiatives.

Do you know an individual or organization who has volunteered time and efforts to raising community awareness in the area of health and safety? The NLCSA wants to hear about them and celebrate their dedication to health and safety in the community. Consideration will be given only to activities that occurred within the calendar year of 2017.

*members of the NLCSA Board of Directors are not eligible to submit nominations

Organization/Individual Name: _____

Address: _____

Phone: _____ E-Mail: _____

Nominator: _____

Nominator's Employer: _____

Nominator Phone: _____ Nominator E-Mail: _____

Brief description of business operation:

Please provide a short submission highlighting why this organization or individual is deserving of the Community Partner Award. In your submission, please include the following:

- A description of the community volunteer initiative(s) in which the organization/individual participated, including scope of work, duties, time/hours committed to the initiative, in-kind support provided, etc.
- A description of how the initiative(s) promotes health and safety education/awareness in the community.
- A description of the potential impact of the initiative(s).

Submit supporting documentation e.g. a letter of reference.

Incomplete applications will not be accepted. All submission information will be held in the strictest confidence. Award recipients are selected by the NLCSA's Awards Selection Committee. The NLCSA thanks all those who put forth nominations; however, only those selected as award recipients will be contacted.

I certify the above to be true and accurate to the best of my knowledge.

Name: _____ Signature: _____

Title: _____ Date: _____

Deadline for Submission: December 31st, 2017

Please send completed application form and supporting documentation to:
NLCSA Awards Selection Committee, 80 Glencoe Drive, Mount Pearl, NL A1N 4S9
Fax: (709)739-7001 E-mail: info@nlcsa.com

For more information, please visit our website: www.nlcsa.com

Awards will be presented at the NLCSA's annual conference.

Organizations that are nominated must complete this form to enable verification of nominee's safety record.

Safety Record Information

Permission Letter

To: Occupational Health & Safety Branch of the Department of Services NL

SEND TO: Trudy Northover, Departmental Program Coordinator at tnorthover@gov.nl.ca

Please PROVIDE to:

John Ratcliff, Director of Safety Services

Newfoundland and Labrador Construction Safety Association

80 Glencoe Drive, Mount Pearl, A1N 4S9

Information concerning directives and stop work orders issued within the past 3 years solely for the purpose of verifying the below company's award application:

Signed by Company Owner(s): _____

Company: _____

Address: _____

Telephone No.: _____ Fax No.: _____ Email: _____

Safety Record Information

Permission Letter

To: Workplace NL (formerly Workplace Health and Safety Compensation Commission)

SEND TO: Cathy Whiffen, Manager of Prevention Services at Cathy.Whiffen@workplacenl.ca

Please PROVIDE to:

John Ratcliff, Director of Safety Services

Newfoundland and Labrador Construction Safety Association

80 Glencoe Drive, Mount Pearl, A1N 4S9

Information concerning lost time injuries and PRIME status (refund or surcharge) within the past 3 years solely for the purpose of verifying the below company's award application:

Signed by Company Owner(s): _____

Company: _____

Address: _____

Telephone No.: _____ Fax No.: _____ Email: _____