



SUE RYAN SERVICE QUALITY AWARD

Nomination Form

Please complete the following information regarding your nominee: Please print.

Name of Nominee: _____

Address: _____

Phone Number: _____ Email: _____

Employer/Company: _____

Title/Position: _____

Please state why you feel this Nominee should receive the Sue Ryan Service Quality Award
(use separate sheet is desired):

Identify how the Nominee exhibits superb customer service with clients and customers.

Identify the Nominee's community service activities.

Describe the impact that the Nominee's high standard of service has had on his/her customers.

Please provide a letter of support for the nominee. This must be from someone other than the Nominee or Nominator.

Submitted by: _____

Please Print – Name & Phone Number

PLEASE RETURN COMPLETED FORM AND LETTER OF SUPPORT BEFORE JUNE 30, 2010 to the attention of:

Stephen Cryne, President & CEO
CERC
180 Dundas St. W. Suite 1010,
Toronto, ON M5G 1Z8

Please note:

- All information submitted on behalf of the Nominee will be kept strictly confidential.
- An acknowledgement email will be sent to the Nominator upon receipt of the completed Nomination Form.
- Nominations will not be considered by the Committee without a completed Nomination Form.