



**Caring at Work Award**  
Recognize Someone from Your  
Early Childhood Program or Organization by  
Nominating them for the  
Caring at Work Award  
*Deadline for nominations showcased at the Spring Awards Gala  
April 30<sup>th</sup>*

The **Caring at Work Award** is recognition of individual early learning and care practitioners by their peers in the ECE community. We all know someone who deserves this recognition... **You** can nominate that person from your childcare program or organization for a **Caring at Work Award!**

Celebrate your nominees with a special appreciation event. Some programs get together with other programs for a pot luck dinner, others hold a recognition ceremony in their program and others celebrate in other ways!

You will receive a **Caring At Work Award** certificate and pin to present to your nominee in recognition of her/his exceptional care and dedication! Your nominee's name will be listed along with other **Caring at Work Award** winners in a display at the **AECENS Awards and Recognition Spring Gala**.

**To nominate someone** please complete the nomination form including the nominee's story and enclose a payment for the amount specified on the form (\$20+HST per nominee) to cover the cost of pin and framed certificate.

Nominee Name: \_\_\_\_\_

Program/ Organization: \_\_\_\_\_

Program Contact (Phone number/ email) \_\_\_\_\_

Send the pin and certificate to:

Name \_\_\_\_\_ Centre \_\_\_\_\_

Address \_\_\_\_\_ Postal Code \_\_\_\_\_

Number of nominations \_\_\_\_\_ @ \$20+HST for each nominee Total cost \$ \_\_\_\_\_

**Send your nomination by April 30<sup>th</sup> to:**



Caring at Work Awards  
Association of **Early Childhood Educators NS**  
Suite 102 - 3845 Joseph Howe Drive  
Halifax, NS B3L 4H9  
[Info@AECENS.ca](mailto:Info@AECENS.ca) | (902) 423-8199



# Nomination Form

## Caring at Work Award

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(Nominee's Name)

**has been nominated by**

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(Nominator)

for the **Caring at Work Award**

**Nominee's Story:** They have been nominated because:

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Continued...

Name of Individual Nominated: \_\_\_\_\_

Nominated because (continued)

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The nominee's name will be published and displayed at the *AECENS Spring Awards and Recognition Gala*.

I affirm that the information contained in this application package is, to the best of my knowledge, complete and correct. I understand that the information provided may be published and I give my release for that purpose.

**Contact Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Position:** \_\_\_\_\_