

THE QUEEN ELIZABETH II DIAMOND JUBILEE MEDAL

NOMINATION FORM * ALL FIELDS ARE MANDATORY UNLESS NOTED * PRINT CLEARLY

NOMINEE INFORMATION

Last Name **Morgan** Given Name(s) **Joshua**
 Street Address **989 Westdel Bourne** Apartment/Unit #
 City/Town **London** Prov. **Ontario** Postal Code **N6K 4S2**
 Phone **519-433-6428** E-mail Address **joshua_morgan@hotmail.com**
 Gender MALE FEMALE Language ENGLISH FRENCH Date of Birth (mm/dd/yy) **03 /23 /1978**

Honorary Title NONE CHIEF YOUR EXCELLENCY YOUR EXCELLENCY THE RIGHT HONOURABLE YOUR HONOUR
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Other Title(Specify) Military? YES NO Rank(Specify)

Is the Nominee a Canadian citizen? YES NO Is the Nominee currently alive? YES NO

Post-nominals (Optional)

Current Position of Nominee (Optional) **Chair, London Public Library Board**

- Field of Endeavour
- | | | |
|---|---|--|
| <input type="checkbox"/> AEROSPACE | <input type="checkbox"/> ARCHITECTURE | <input type="checkbox"/> ARTS & CULTURE |
| <input type="checkbox"/> BUSINESS/COMMERCE | <input type="checkbox"/> INDUSTRY/ECONOMICS | <input type="checkbox"/> CANADIAN FORCES |
| <input type="checkbox"/> COMMUNICATIONS | <input checked="" type="checkbox"/> COMMUNITY SERVICE | <input type="checkbox"/> EDUCATION |
| <input type="checkbox"/> ENGINEERING | <input type="checkbox"/> ENVIRONMENT | <input type="checkbox"/> HEALTH CARE |
| <input type="checkbox"/> HERITAGE & HISTORY | <input type="checkbox"/> HUMANITARIAN AID | <input type="checkbox"/> MULTICULTURAL |
| <input type="checkbox"/> PHILANTHROPY | <input type="checkbox"/> POLITICS | <input type="checkbox"/> PROTECTIVE SERVICES |
| <input type="checkbox"/> PUBLIC SERVICE | <input type="checkbox"/> RCMP | <input type="checkbox"/> RELIGIOUS SCIENCE |
| <input type="checkbox"/> SOCIAL SERVICES | <input type="checkbox"/> SPORTS | <input type="checkbox"/> TECHNOLOGY |
| <input type="checkbox"/> VETERAN | <input checked="" type="checkbox"/> VOLUNTARY SERVICE | <input type="checkbox"/> OTHER _____ |

SUMMARY

Use this space to provide a short citation or brief summary of the nominee's achievements (up to 250 characters or 40 words)

Please See Attached Document(s)

NOMINATOR INFORMATIONLast Name **Brown**Given Name **Matt**Street Address **1815 Bayswater Cres**

Apartment/Unit #

City/Town **London**Prov. **Ontario**Postal Code **N6G 5N1**Phone **519-641-2608**E-mail Address **matt@matthewbrown.ca**Relation to the Nominee **Friend, Colleague**How long have you known the Nominee? **10 years****REFERENCES (OPTIONAL)**

List up to three other references willing to vouch for your Nominee.

Full Name **Susanna Hubbard Krimmer**Relation to Nominee **Library Colleague**Company/Organization **London Public Library - CEO**Phone **519-661-5143**Address **251 Dundas Street, London, ON N6A 6H9**Full Name **Rick Gillespie**Relation to Nominee **Friend / Volunteer Colleague**Company/Organization **London Police Service - Ret'd**Phone **519-641-2815**Address **9 Naomee Cres, London, ON N6H 3T3**Full Name **Hugh Mitchell**Relation to Nominee **Western Fair District Colleague**Company/Organization **Western Fair District - CEO**Phone **519-438-7203 x386**Address **316 Rectory Street, London, ON N5W 3V9**

May we contact your listed references?

YES NO

May we contact you for more information?

YES NO **DISCLAIMER AND SIGNATURE**

I certify that the answers enclosed are true and complete to the best of my knowledge.

Signature

Date