



**Operation
Back to School**

Over **20 Years**
of commitment
to school retention

Nomination form

Stay-in-school scholarship

Contact Information

Your last name: _____

Your first name: _____

You are a: Teacher
 Director

Guidance Counsellor
 Other resource person

Telephone number (at which you can be easily reached):

Email address:

School

Name and address of your school:

Name of your school board:

Nominee

Full name of the nominated student:

Date of birth of the nominated student (dd/mm/yyyy):

Female Male

Level/Year: _____

Reasons for the nomination:

*Explain why the student in question deserves a scholarship. (1400 characters limit)
Provide examples that illustrate his or her commitment and efforts to stay in school.*

In April, a selection committee, made up of members of the Chamber of Commerce of Metropolitan Montreal, will choose the finalists from the nominations received. These finalists will be declared prize winners provided they meet all the conditions described in the rules. We will contact you if the student you nominate has won. If your nominee wins, you will be responsible for rapidly contacting the student's parents to tell them the good news. The student should be available to take part in the scholarship ceremony in May in a location to be determined in downtown Montréal. If the student cannot attend the scholarship ceremony, another student will be selected.

THANK YOU FOR PARTICIPATING!

Signature
of the nominating party

Signature of a member of the
administration of the school
supporting the nomination