

## **AWARD NOMINATION FORM**

Food Innovation Award	
Purpose	To honour an individual or team for outstanding work in food innovation.
Eligibility Criteria	The individual or team must have made a significant contribution to food innovation. The innovation must have been on the market for at least one year prior to nomination. The individual or at least one member of the team must be a member of CIFST.
Selection of Award Recipient	An Awards Committee is struck each year. The Past President of the CIFST is appointed chair of the Awards Committee and is responsible for assembling a committee of four to six current CIFST members from different sections across the country. Members of the Awards Committee review the nomination documents prior to the selection meeting. An award recipient must receive majority support from all members of the Awards Committee.
Nomination Procedure	Award nominations may be submitted by individual CIFST members or regional Sections of CIFST.
	Responsibilities of Nominator:
	Contact Nominee well before nomination deadline to inform candidate that a nomination document is being prepared.
	Fill in nomination form and assemble required supporting documents, including letters of support.
	Submit nomination form and required supporting documents to the Executive Director of the CIFST by the deadline indicated on the CIFST website.
	Note: Support from the Section's Executive will strengthen the nomination.
	Responsibilities of Nominee:
	Approve request to be nominated for a CIFST award.
	Supply required information as described below.



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Nomination Form - Food Innovation Award		
Full Name of Nominee		
Title		
Employer		
Business Address		
Telephone		
Email		
Educational Background of Nominee		
Description of the Candidate's Accomplishments	The nomination should include a carefully written statement highlighting the significance of the innovation. Brief letters of support from others, referring to the award criteria, will strengthen the nomination.	



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CONTACT INFORMATION OF NOMINATOR (must be a current CIFST member)		
Full Name		
Title		
Business Address		
Telephone		
Email		