

Statement of Understanding:

I am forwarding this nomination with the understanding that it is to be considered on its merits by the Canadian Board of Occupational Medicine and, if recommended, the final decision for acceptance will be made by the CBOM Executive Committee. I certify that the information provided in this document is an accurate reflection of the information obtained from the annotated sources. I also understand that if rejected for an award this year, the nomination can be resubmitted next year or any following year.

Date

Signature of Nominator