OLD SCOTCH COLLEGIANS ASSOCIATION

# OSCA MERIT AWARD NOMINATION FORM

Nominee's Surname ..... Given name(s) .....

Class of .....

Name of referee (1) .....

Signature of referee (1) .....

Telephone .....

Name of referee (2) .....

Signature of referee (2) .....

Telephone .....

**Submission**

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*Please include all information necessary to support the nomination. If insufficient space, include additional pages.*

**Signed:** Proposer ..... Seconder .....

Date ..... / ..... Date ..... / .....

*Please return this form to:* The Executive Director, OSCA, 1 Morrison Street, Hawthorn 3122