



CANADIAN COUNSELLING AND  
PSYCHOTHERAPY ASSOCIATION  
L'ASSOCIATION CANADIENNE DE  
COUNSELING ET DE PSYCHOTHERAPIE

# CCPA AWARDS NOMINATION APPLICATION FORM

**Application Form and all accompanying documents must be received by December 1st.**

Please visit <http://www.ccpa-accp.ca/en/memberbenefits/awards/> to review the award requirements.

Name of applicant or nominee: _____	
Name of award: _____	
Title of submission (if required): _____	
Date: _____	Signature: _____

## **Nominators (when required)**

Name: _____	
Telephone: _____	Email: _____
Date: _____	Signature: _____
Name: _____	
Telephone: _____	Email: _____
Date: _____	Signature: _____

## **List of enclosed documents**

- 1) \_\_\_\_\_
- 2) \_\_\_\_\_
- 3) \_\_\_\_\_
- 4) \_\_\_\_\_
- 5) \_\_\_\_\_

Rationale:

Submit completed form and enclosed documents before December 1st to:

### **CCPA Awards**

202-245 Menten Pl

Ottawa (Ontario) K2E 9E8

**Fax: 613-237-9786**

**E-Mail: [info@ccpa-accp.ca](mailto:info@ccpa-accp.ca)**