

NOMINATION FORM
THE FATHER ANDREW CUSCHIERI AWARD

Please submit by April 30, 2018

Name: _____

Address: _____

Date of Birth: _____ **Grade** _____

School & Address: _____

Name of Parish: _____ **Nominator:** _____

Name of Post Secondary School _____
(if applicable)

Reason for Nominating this Student (If additional space is required, please use a separate sheet):

Parish Priest	Date	Pastoral Council Chair
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(both signatures are required)

Send nomination form by email to: denisehowse@rcdiocesegrandfalls.ca or mail to:

Office of Youth
Diocese of Grand Falls
PO Box 397
Grand Falls-Windsor, NL A2A 2J8