

**SECTION:**

**PROGRAM**

**4000-17-A**

**TOPIC:**

**Shining Star Award**

**EFFECTIVE DATE:**

**January 2006**

**REVISED DATE:**

**June 2006**

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This award will be presented annually to the Saskatchewan athlete who best exemplifies the Spirit of Special Olympics.

**Nominations:**

Each Special Olympics accredited zone/community is encouraged to nominate athletes who they feel are worthy of receiving this prestigious award. Nominations are accepted from any SOS member in good standing including: **the executive committee, coaches, volunteers, athletes, Board of Directors, Sport Advisory Council, and the provincial office** by (annual deadline date). All nominations must be accompanied by a Nomination Form (attached), two (2) letters of reference and either a digital photo OR a passport sized photo (hard copy).

The Special Olympics Saskatchewan Awards committee will carefully review the nominations and select the winners.

**Award Criteria:**

- Nominations will be judged on the strength and quality of their submission by the criteria outlined below:
  - Enduring positive attitude toward their participation in sport and Special Olympics (including consistent attendance at practices, games, and other Special Olympics events)
  - Courtesy, care and concern for fellow Special Olympics athletes, coaches, and volunteers
  - Striving spirit and outstanding effort
  - Ideals of sportsmanship (i.e. fairness, honesty, unselfishness, respect, responsibility, civility, fair play, etc.)
- This nomination may be based upon a single extraordinary example or continuous sportsmanlike conduct.

**Award Recognition:**

- This award will be presented to the successful recipient at the Provincial Awards Banquet held annually.
- The recipients will receive a Shining Star plaque.
- The recipients will be recognized in the Special Olympics Saskatchewan newsletter.

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**NOMINATION FORM**

<b>Nominee's Name:</b> _____	
<b>Address:</b> _____	
<b>City:</b> _____	<b>Postal Code</b> _____
<b>Telephone Number: (H)</b> _____	<b>(B)</b> _____
<b>E-Mail:</b> _____	
<b>Gender: (Please Circle)    Male            Female</b>	

Please complete the following information in support of this nomination.

**a. How has the athlete exemplified the Spirit of Special Olympics (i.e. commitment, attitude, participation)?**

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**Nomination Form**

**b. How has the athlete demonstrated personal growth and development i.e. self-discipline, independence, self confidence, etc.?**

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**Please complete the nomination form and return by the deadline date of each program year.**

Nominated by: _____		
Address: _____		
City/Town: _____	Postal Code	_____
Phone Number: (H) _____	(B) _____	
E-mail: _____		
_____	_____	_____
(Signature)	Position relating to SOS	Date
_____	_____	_____
(Witness Signature)	Position relating to SOS	Date

<b>FOR OFFICE ADMIN ONLY:</b>	
<b>DATE RECEIVED:</b>	<b>Sports Registered In:</b>
<b>MEMBER SINCE:</b>	
<b>NCCP#:</b>	
<b>INITIALS:</b>	

