

## ROBERT-SAUVÉ AWARD

### ROBERT-SAUVÉ AWARD CANDIDACY APPLICATION FORM

**The Candidacy Application Form must  
be sent to the Selection Committee at  
the following address:**

Commission des services juridiques  
2 Complexe Desjardins, Tour Est, #1404  
C.P. 123, Succ. Desjardins,  
Montréal (Québec) H5B 1B3

#### Identification of nominee

**NAME:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_

\_\_\_\_\_

**TELEPHONE:** Residence: \_\_\_\_\_ Office: \_\_\_\_\_

Please attach a brief description of the career and/or the exceptional realization of the nominee



## ROBERT-SAUVÉ AWARD

### Identification of two persons who support the nomination

**NAME:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_

\_\_\_\_\_

**TELEPHONE:** Residence: \_\_\_\_\_ Office: \_\_\_\_\_

**SIGNATURE:** \_\_\_\_\_

**NAME:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_

\_\_\_\_\_

**TELEPHONE:** Residence \_\_\_\_\_ Office: \_\_\_\_\_

**SIGNATURE:** \_\_\_\_\_



