

Newfoundland and Labrador Seniors of Distinction Awards

The Newfoundland and Labrador Seniors of Distinction Awards recognize and celebrate the contributions, achievements and diversity of seniors throughout Newfoundland and Labrador.

Who can I nominate?

- Nominee must be 50 years of age or older.
- Nominee must be a current or past resident of Newfoundland and Labrador.
- Past or present public officials are eligible for nomination.
- Self nominations are not accepted.
- Nominations can be for voluntary or paid work.
- Posthumous awards may be given.
- Awards are presented to individuals; group nominations are not eligible.

Who should be nominated?

It is important to recognize the many contributions people make throughout their lifetime. We invite you to nominate people who have enriched our physical, social, cultural and/or community well-being including those who have been age and dementia-friendly community champions at the local, provincial, national and/or international level.

Guidelines and Nomination Forms

Who can nominate?

Nominations can be submitted by an individual, group or organization.

How do I nominate?

Enclose all of the following:

1. Nominator information (**including signature**).
2. Nominee information (**including signature**).
3. Reasons for nomination.
4. Two (2) letters of support (**including signature**).
5. Additional information (if desired).

How are the award recipients selected?

A selection committee will review the nominations and make recommendations to the Minister of Children, Seniors and Social Development.

How can I get further information?

Contact the Seniors and Aging Division
Children, Seniors and Social Development

Email: seniorsofdistinction@gov.nl.ca

Website: gov.nl.ca/soda

Tel: 1.888.494.2266 (toll-free)

Fax: 709.729.6382



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Reasons for Nomination

Please include a summary of the reasons why you believe this person should receive the Newfoundland and Labrador Seniors of Distinction Award, including their accomplishments and contributions. Please summarize (1) the contributions made to social, cultural and/or community life; and (2) the impact of these contributions.

Letters of Support

Letters must indicate the name of the nominee and must be from individuals other than the person who is nominating. Letters must be signed and include full contact information.

Additional Information

You may include information such as additional letters of support, photographs, news stories or tributes.

Nominations must be received by

Friday, May 9, 2025

If you require support in completing a submission, assistance will gladly be provided by the Seniors and Aging Division.

Please call toll-free 1.888.494.2266

Send the completed submission to:

Selection Committee

Seniors of Distinction Awards c/o Seniors and Aging Division

Children, Seniors and Social Development
Confederation Building

P.O. Box 8700

St. John's, NL A1B 4J6

Email: seniorsofdistinction@gov.nl.ca

Fax: 709.729.6382



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Nominator Information

Please provide information on the person, group and/or organization submitting the nomination.

Title: _____

Name: _____

Group/Organization (if applicable): _____

Mailing Address: _____

Postal Code: _____

Telephone: _____

Email: _____

Please indicate how you learned of this award program _____

I confirm that the information and supporting documentation contained in this nomination package are correct to the best of my knowledge, information and belief.

Nominator's signature: _____ Date: _____



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Nominee Information

Please provide information about the senior you wish to nominate.

Title: _____

Name: _____

Mailing address: _____

Postal Code: _____

Community of Residence: _____

Telephone: _____

Email: _____

Date of Birth: _____

Community of Origin

If I am selected to receive an award please print my name as _____
in communiques, award engraving, etc.

I consent to stand for nomination and to participate in the Seniors of Distinction Awards. My name, photo and any personal information contained in this nomination form and supporting documentation may be used in any internal and external communication that will showcase the nominees and/or recipients of the award. I understand that my telephone number, postal code and e-mail addresses will not be disclosed in any such communication.

I also confirm that the information and supporting documentation in this nomination package are correct to the best of my knowledge, information and belief.

Nominee's signature: _____ Date: _____

Note: If the nominee is deceased, please contact
the Seniors and Aging Division for a special consent form.

