

2015 CANADIAN CHIROPRACTOR INSPIRE AWARDS

NOMINATION FORM

Welcome to the 2015 Canadian Chiropractor INSPIRE Award - a program recognizing exceptional chiropractors who are serving as inspiration to others through their extraordinary efforts to pursue a great cause and promote the chiropractic values to the community.

* 1. Name of the chiropractor being nominated

2. Please provide the nominee's contact information.

Address	<input type="text"/>
Address 2	<input type="text"/>
City/Town	<input type="text"/>
State/Province	<input type="text"/>
ZIP/Postal Code	<input type="text"/>
Country	<input type="text"/>
Email Address	<input type="text"/>
Phone Number	<input type="text"/>

* 3. Does the nominee practice in Canada?

- Yes
- No
- Not sure

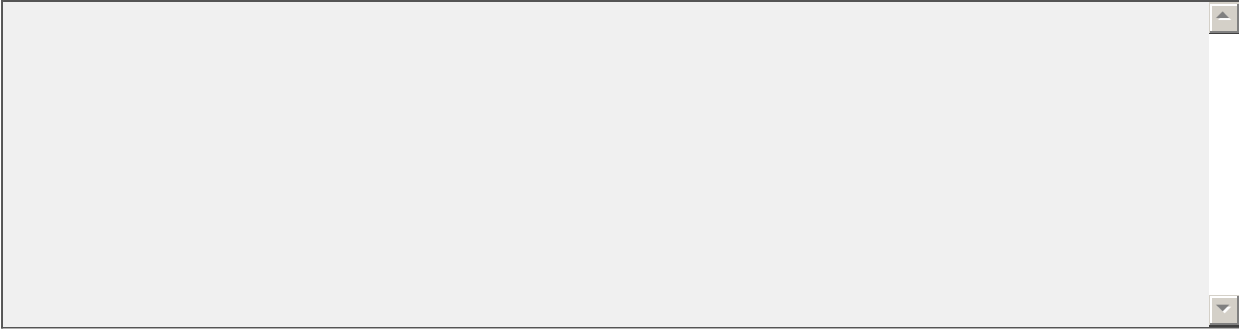
* 4. How many years has the chiropractor been in practice?

- Less than 2 years
- 2 to 5 years
- 6 to 10 years
- More than 10 years

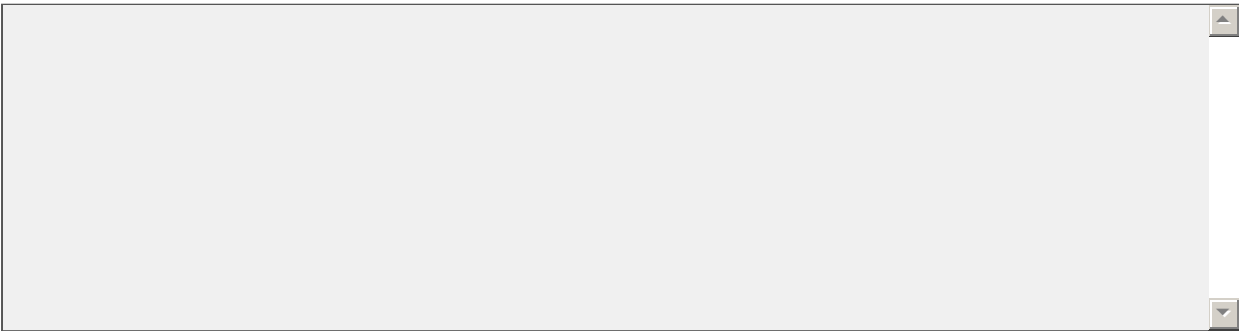
5. Aside from DC, please provide any additional professional designation, certification or specialty the nominee holds. (Leave blank if not applicable)

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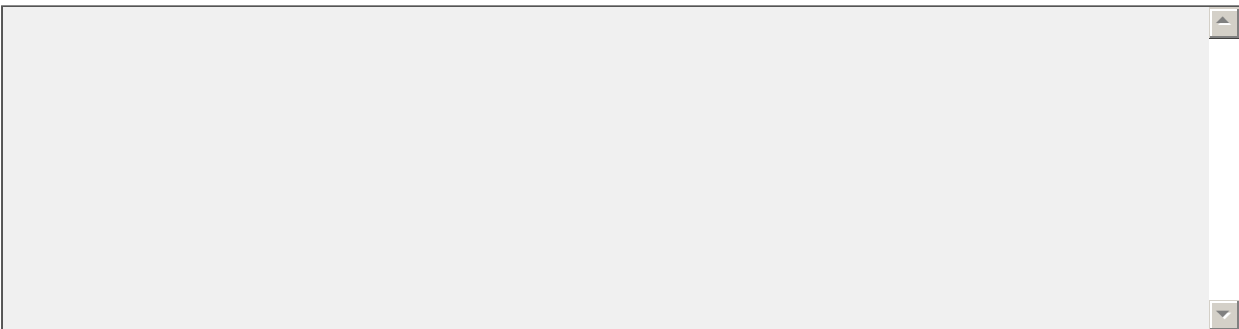
***6. Describe the nominee as a doctor of chiropractic (their passion, special interests, specialty treatments, visions and principles). Please provide as much detail as possible.**

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***7. Describe the projects, initiatives, activities of the nominee that go above and beyond in service to the community, in pursuit of a great cause and/or in promoting the chiropractic values and benefits. Please provide as much detail as possible.**

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***8. How does the nominee demonstrate the qualities of honesty, integrity, leadership and compassion?**

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***9. Why do you believe the nominee deserves the INSPIRE Award?**

10. Please provide YOUR name and contact information.

Name

Email Address

Phone Number

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NOMINATION COMPLETE

Thank you for submitting a nomination on behalf of an inspiring Canadian chiropractor. We will be announcing the winners in the May 2016 issue of Canadian Chiropractor.