School or Education Facility Name Nomination



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Please print or type all information; use additional sheets as necessary and attach exhibits or other documentation in support of this nomination. For details, refer to Mission Public Schools Board Policy Naming and Renaming School or Education Facility It is proposed that _____ (Describe facility) (Specific name) in honour of and in accordance with the following criteria as established by the school district for Mission Public Schools. 1. Criteria for Naming Name Submissions are expected to: a. Honour Indigenous place names or languages, or figures of local significance. b. Reflect geographical, environmental, or cultural features of the area. c. Honour a distinguished person who; i. Made an extraordinary contribution to the school district. ii. Demonstrated a record of distinction in their respective field, evidenced by a variety of outstanding accomplishments, awards, leadership and service roles in their profession and community; iii. Demonstrated positive role modelling and commitment to excellence. The historic or current name of the district of local community in which the school is located. d. Be symbolic of a unique program focus in the case of specialized schools. e. Recognize a major benefaction where a significant portion of the cost of the building/facility is made by the donor. f. Avoid duplication with existing school names in the province. g. Not be named after living individuals. Posthumous nominations should be made 5 years after the individual's death. h. Avoid names that reflect colonialism, racism, or exclusion. A historic or current name of the area, geographic location, or other site-specific identifiers. Explain the reasoning and significance of the recommendation below. An individual. Attach a biographical summary and articulate fully the following criteria: 1. Has made an extraordinary contribution to the school district (describe with documentation).

accomplishments, awards, leadership and service roles in their profession and community;

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2. A demonstrated record of distinction in their respective field, evidenced by a variety of outstanding

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| (| (describe with documentation). | |
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| | | |
| | | |
| 3. 1 | Has been a positive role model for others | (describe with documentation). |
| | | |
| | | |
| 4. I | Has shown a commitment to excellence (c | lescribe with documentation). |
| | | |
| | | |
| | | |
| Signed: | OI | n behalf of(Group name, if any) |
| Name: | (Print name) | |
| Contact Inf | formation | |
| Address: | | Phone: |
| | | Email: |
| | ovide contact information for the nomine s deceased). | ee (or for a family member, friend or colleague if the |
| Name: | | Phone: |
| Address: | | Email: |
| Please note | te: | |

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Incomplete forms will not be considered. Evidence of broad community support for this request should accompany this nomination.

Send completed forms to:

Mission Public Schools School Naming Committee 33046 4th Avenue Mission, BC V2V 1S5