



# NOMINATION FORM

## *Karilagan Dance Society*

Suite # 495 9768 170 Street Edmonton, Alberta T5T 5L4

Phone: 780 709-2832

website: [www.karilagandancesociety.org](http://www.karilagandancesociety.org)

## AWARD OF EXCELLENCE

**\*\*HIYAS\*\***

**“GEM”**

### PERFORMING ARTS

“Performing Arts” for the purpose of this award shall include drama, dance, song, choreography, directing and composing.

To be eligible for nomination, a nominee should:

1. have been a resident of the Province of Alberta for a period of three years;
2. be a Filipino descendant;
3. have excelled in this field and made an outstanding contribution to the prestige of the Filipino community and the Province of Alberta or have gained local, provincial, national or international recognition; and
4. be of good moral character and had no criminal record.

Nomination form must be submitted no later than **March 31, 2025** to the address below:

Karilagan Dance Society  
Suite 495 9768 170 Street  
Edmonton, Alberta T5T 5L4

or email to [elminac26@gmail.com](mailto:elminac26@gmail.com) including photos of certificates, medal, trophies, etc.

The award recipients will be selected by judges of no Filipino heritage. The awards will be presented during the Karilagan’s 27th Hiyas “Gem” Award Night & 54th Anniversary Show on May 10, 2025 at the Edmonton Hotel & Convention Centre.

I am nominating

Name \_\_\_\_\_ Tel. No. \_\_\_\_\_

Address \_\_\_\_\_ Years of \_\_\_\_\_

\_\_\_\_\_ Residency \_\_\_\_\_

\_\_\_\_\_

Photo of Nominee  
required  
2" x 2"

Please state the reasons for nomination and provide original copy of supporting documents i.e. certificates, awards, medals, trophies, etc.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## **SELECTION CRITERIA**

1. Local Award for Performing Arts
2. Provincial Award for Performing Arts
3. National Award for Performing Arts
4. International Award for Performing Arts
5. Contribution to Filipino Community and Alberta
6. Education Related to Performing Arts

**“Please provide information pertinent to the above criteria on a separate sheet.”**

Nomination Submitted by:

Name \_\_\_\_\_ Tel. No. \_\_\_\_\_

Address \_\_\_\_\_ Cell No. \_\_\_\_\_

\_\_\_\_\_

Signature of Nominator \_\_\_\_\_ Date \_\_\_\_\_