

# EMS EXEMPLARY SERVICE MEDAL ONTARIO INFORMATION FORM 2024

## Nominee Information

Service:	<input type="text"/>		
Surname:	<input type="text"/>	First Name:	<input type="text"/>
		Initial:	<input type="text"/>
Current Status:	<input type="text"/>		
Date of retirement/death:	<input type="text"/>		
The nominator must confirm the nominee has not been the subject of significant discipline including, but not limited to, violations of patient care standards, patient confidentiality or Criminal Code offences, or recent minor discipline			
I can confirm the Nominee has not received/been the subject of major discipline or recent minor discipline:	<input type="text"/>	If "No", date of last discipline:	<input type="text"/>
Does Nominee identify as First Nations or Indigenous?	<input type="text"/>		

## Nominating Authority/Current Employer Information

As prescribed by the Regulations governing National Honours and Awards, EMS ESM nominations can only be submitted by a member of the Service or Entity Management Staff who is senior in rank or position to the nominee.			
Nominator Name:	<input type="text"/>		
Title:	<input type="text"/>	Email:	<input type="text"/>
Number of Years the Nominee has been known by the Nominator:	<input type="text"/>		

## Individual Profile - EMS

The ESM is not a long service medal, it is awarded only for individuals who have demonstrated exemplary service. For the review committee to better know the nominee, tell us about some of their interests and involvement.

Please note that if there is insufficient information provided to demonstrate Exemplary Service the Review Committee will not recommend approval of the award.

Describe any relevant EMS Committee or Team activities including dates and positions: (example, OHS, Service Review, College Committees, etc)

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**Describe any relevant EMS Volunteer Activities including dates and level of commitment:**

(eg Paramedic Memorial Ride, Peer Support, fundraising MedVent, Patient Care Competitions, PR displays, school visits etc)

**Describe any EMS Association Activities including dates and level of activity:**

(eg OAPC, OPA, PAC, PCC, APCO, NENA, IAED or other)

**Describe any other received awards or recognition and the year:** (eg OAPC Award of Courage, Ontario Award of Bravery, McNally Award,

Rohmer Commendation, another medal awarded through the Governor General of Canada, Corporate Recognition, etc.)

**Describe any EMS Paramedic or Student Instruction activity:** (eg Base Hospital Instructor, College Lab Instructor, Preceptor (including

number of years, leadership mentoring)

**Describe any Community Church, Fundraising, or Humanitarian Activities including details and years:** (eg Church

Council, missionary or relief work, fundraising, Disaster Relief)

**Describe any Community based activities the nominee has been involved in including details and dates:** (eg Municipal

council or committees, Scouting, United Way or other charities, Police auxiliary, Volunteer Firefighter, service clubs, Red Cross, St. John, volunteer school activities)

**Describe any Community Sports support including details and years:** (eg volunteer coach, manager, trainer, convener, referee,

fundraising, etc.)

Describe any Canadian Military Experience: (Regular forces, Reserve Forces, Cadet Instructor Cadre, including start and end dates and activities)

Has the Nominee received a CD or other Military Decoration? (Describe and Year)

Decoration:

Year:

Any other Comments or Notes:

**Nominations must be received by February 9,2024**

Please save document as: <2024 [Service Name] [Nominee Surname].pdf>

Email this form, along with the Chancellery Nomination Form, to [ESMnominations@oapc.ca](mailto:ESMnominations@oapc.ca)