*Please consider the environment before printing.*

**Project Title:**

**Name of the individual:**

In the role of: [ ] Producer [ ] Writer [ ] Director

**CMF Selective Program name:**

 ***Please complete this form to indicate past Nominations, Awards and Festival screenings for previous work accomplished in the role of Producer, Writer and/or Director, as per the example below. Please complete one form for each individual fulfilling the role(s) of Producer, Writer and/or Director for the Project being submitted to the CMF for funding from a Selective Program.***

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| E X A M P L E |
| **YEAR**from most recent | **PROJECT TITLE**GENRE | **YOUR ROLE**(producer, director, writer)  | **AWARD OR FESTIVALS NAME**NOMINATION CATEGORIES(one festival per line) | **AWARD WON** (Yes/No/n/a) |
| 2024 | **Project #1**Documentary one-off | DirectorWriter | **Canadian Screen Awards**Best Direction Documentary ProgramBest Writing Documentary | Yes No |
| **RIDM**Best Direction Documentary Program | Yes |
| **TIFF**Special Presentation | n/a |
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| 2023 | **Project #2**Webseries | Producer | **Hot Docs Festival**Short series Nomination | No |
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