



## NHCFAE NATIONAL AWARDS PROGRAM NOMINATION FORM

(NOTE: Form may be reproduced or retyped as needed. If retyped, do not omit any of the required information.)

### I. Nominee.

Name: \_\_\_\_\_

(If nominee is an individual, indicate Mr., Miss, Ms., and Mrs. If nominee is a group, indicate full name of group and contact person.)

Title: \_\_\_\_\_

Area Code and Phone Number (\_\_\_\_\_) \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

### II. Category (Please check one category per nomination).

- Member of the Year
- Officer of the Year
- Region/Center Chapter of the Year
- Non-Member of the Year
- Civil Rights Officer of the Year
- FAA Manager of the Year
- Supervisor of the Year

III. Proposed Citation. (A one-sentence statement describing why the individual or group is being nominated. This statement will be used in the presentation of the award and for publication in La Palabra.)

IV. Justification for Award. (Include supporting documentation, i.e., specific information about contributions, achievements, programs implemented, etc.).

### V. Nominator.

Name: \_\_\_\_\_

Area Code and Phone Number (\_\_\_\_\_) \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

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