Atlantic County Women's Hall of Fame

2011 Nomination Form

1. Name of nominee _____
   First Middle Initial Last

2. Home address _____
   Street

   _____
   City State Zip Code

3. Home telephone _____

4. Current Occupation _____

5. Business address _____
   Street

   _____
   City State Zip Code

6. Business telephone _____

7. Category for which the nomination is made _____
   (Must be completed for nomination to be considered. Choose only one category form the list on the other side of this form.)

8. Nominee's eligibility (Please check all that apply.)
   - ☐ Born or raised in Atlantic County.
   - ☐ Atlantic County resident for at least 10 years.
   - ☐ Employed in Atlantic County for 10 years.

9. Attach your nominee's biography containing background, education, training and career accomplishments. (Maximum one typewritten page.)

10. What significant accomplishments make this nominee one of Atlantic County's most outstanding women?
    - Explain the impact of nominee's contribution.
    - Include personal anecdotes, notable quotes from the nominee or copies of any media coverage she has received.

    (Maximum one typewritten page).

11. Attach TWO letters of recommendation.

12. Name of person/group submitting nomination _____

    Address _____
    Street

    _____
    City State Zip Code

    Telephone _____

13. Signature of individual submitting nomination: _____

NOMINATION FORMS MUST BE RECEIVED NO LATER THAN OCTOBER 31, 2010