

# 2009 AWARDS NOMINATION FORM



## NOMINEE INFORMATION

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

Organization: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Work Phone: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Fax: \_\_\_\_\_ Email: \_\_\_\_\_

## AWARD INFORMATION

Please choose which of the following awards for which you would like to nominate this individual.

- |   |   |
|---|---|
| <input type="checkbox"/> Gay Byers Newcomer Award (member, less than 10 years)    | <input type="checkbox"/> Section Community Award (non-member) |
| <input type="checkbox"/> Distinguished Service Award (member, more than 10 years) | <input type="checkbox"/> Community Service Award (member)     |

## QUALIFICATIONS

Professional Achievements: *(recognitions, research, teaching, administration, writing, educational background)*

Outstanding Contributions to the Advancement of Camping:

ACA Southeastern and/or ACA National Responsibilities and Achievements:

Brief Statement as to Why This Candidate Should Receive an Award:

Additional Comments:

## NOMINATED BY

Name: \_\_\_\_\_ Camp/Organization: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

MAIL/FAX completed nomination form to:  
ACA Southeastern, 13000 S. Tryon Street, Suite F #310, Charlotte NC 28278; Fax 704-288-4402