2026-2027 JEANNETTE FRANK CONTINUOUS SERVICE AWARD
NOMINATION FORM
(PLEASE TYPE OR PRINT CLEARLY)

WHO IS YOUR NOMINEE?

NAME_____

MEMBERSHIP NUMBER_____JOINED IN _____

IS or WAS SHE AN OFFICER and/or CHAIRMAN AT AN LEVEL? YES NO if yes list those held

_____

_____

DOES SHE VOLUNTEER OUTSIDE THIS ORGANIZATION? YES NO if yes list where

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LIST ANY OTHER OUTSTANDING ACCOMPLISHMENTS
ACTIVITIES:_____

_____

THREE(3) MEMBERS TESTIMONY ON WHY THIS MEMBER WAS NOMINATED:(no more than 50 words each)_____

_____

_____

_____

Add sheets if needed:

REMEMBER: *THE NOMINEE MUST HAVE AT LEAST 25 YEARS OF CONTINUOUS MEMBERSHIP TO QUALIFY. PREVIOUS RECIPIENTS ARE NOT ELIGIBLE FOR NOMINATION****!***

ENTRIES MUST BE POSTMARKED BY: APRIL 15, 2027 TO BE CONSIDERED

NOMINATOR NAME_____AUX#_____DISTRICT_____
ADDRESS_____CITY/ST/ZIP_____
PHONE:_____EMAIL_____

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