

# Marilyn J. Smith Inspirational Award Application

*This page must be completed and submitted with letter or Vlog of support for the nominee no later than February 20th, 2015 at 4pm.*

Please make sure to write clear and legibly

## Nominee Information:

Name of  
Nominee \_\_\_\_\_

Address of  
Nominee \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_  
Zip \_\_\_\_\_

Nominee Phone/VP  
Number \_\_\_\_\_

Nominee E-  
Mail \_\_\_\_\_

## Nominating Party's Information:

Name of  
Nominator \_\_\_\_\_

Address of  
Nominator \_\_\_\_\_

**City** \_\_\_\_\_ **State** \_\_\_\_\_  
**Zip** \_\_\_\_\_

**Nominator Phone/VP  
Number** \_\_\_\_\_

**Nominator E-  
Mail** \_\_\_\_\_

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**Signature of Nominating Party**

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**Date**