



CLERK OF THE YEAR AWARD NOMINATION FORM

NAME OF NOMINEE: _____

TITLE OF NOMINEE _____

JURISDICTION: _____

DATE APPOINTED: _____

AREAS OF ACCOMPLISHMENT:

Please identify specific instances within each area where the Clerk has performed outstanding service. Describe in detail on additional sheets and attach to this nomination form.

- 1) Leadership, organization, administration and communications.
- 2) Legislative and governing body procedures, records management and public relations.
- 3) Outstanding service to WMCA, commitment to professional development and contribution to the clerk profession (time/length of service, service on WMCA Committees, attendance at State conferences, attendance at other WMCA sanctioned training events, involvement in regional groups and/or IIMC committees).
- 4) Special projects, community activities, and volunteerism.

The nomination form and optional letters of support must be received by email no later than **Monday, January 21, 2019.**

RETURN TO: Awards Committee Chair, Dee Roberts at dee.roberts@southbend-wa.gov

SUBMITTED BY: _____ **DATE:** _____

TITLE: _____

PRESS RELEASE INFORMATION:

Please list the names and addresses of newspapers, radio stations, public officials, etc., to whom the announcement of this nomination and/or award should be sent. Attach additional pages if necessary.