

## FALL RECOGNITION PROGRAM NOMINATION FORM

| <ul> <li>Outstanding Superintendent</li> <li>Outstanding Treasurer</li> <li>Outstanding Administrator</li> <li>Volunteer of the Year</li> </ul>   | <ul> <li>Outstanding Classified Employee</li> <li>Outstanding JVS or Vocational Program</li> <li>Outstanding Business/Non-Profit</li> </ul> |
|---|---|
| I nominate:   |   |
| Position:   |   |
| From:   |   |
| Describe the nominee/nomination. Include outstanding qualities, relationships to school and other background information. Please limit endorsements to two. Email endorsements, bio and why nominee is deserving of the award in a Word document. |   |
| Name of nominator:  |   |
| Signature:  |   |
| School District:  |   |
| County:   |   |
| Cell number:  |   |
| email:  |   |
| Please return this form by June 30, 2024 to:<br>Reno Contipelli, Northeast Regional Manager<br>52 Marko Lane I Brooklyn Heights, OH 44131-1212<br>Cell: (216) 288-1704 I email: rcontipelli@ohioschoolboards.org                                  |   |
| Board president signature:  | (Or) Treasurer signature:   |

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