

## Senator Carl L. Marcellino 5<sup>th</sup> Senate District 2015 Women of Distinction Nomination Form

Please return to 250 Townsend Square Oyster Bay, NY 11771 or Fax to 516-922-1154 by April 1, 2015

| Name & Address of Nomi      | nee:                           |         |  |
|-----------------------------|--------------------------------|---------|--|
|                             |                                |         |  |
| Telephone:                  | Fax:                           | Email:  |  |
| Name of Nominating Indiv    |                                |         |  |
|                             |                                |         |  |
| Organization or Title of No | ominating Individual if Applic | cable:  |  |
| Address:                    |                                |         |  |
|                             |                                | Email:  |  |
| Please provide the follow   | ing information about the N    | ominee: |  |
| Birth Date:                 | Place of Birth:                |         |  |
| High School:                | College:                       |         |  |
| Academic Awards or Achi     | evements:                      |         |  |
|                             |                                |         |  |
|                             |                                |         |  |

| Community, Civic or Business Awards & Recognitions:              |  |  |
|--|--|--|
|  |  |  |
| Past & Present Community/Civic Involvement:                      |  |  |
|  |  |  |
| Volunteer Service:   |  |  |
|  |  |  |
| Military Service:  |  |  |
| Present Occupation:  |  |  |
| Marital Status: Children:  |  |  |
| Who or what where your Nominees major influences?                |  |  |
|  |  |  |
|  |  |  |
| What, if any obstacles has your nominee overcome?                |  |  |
|  |  |  |
|  |  |  |
| What do you think has been your Nominee's major accomplishments? |  |  |
|  |  |  |
|  |  |  |

Please feel free to attach any additional information