



2010 Nomination Form

Please return this form along with the nominee's resume and bio to:

Libby Rosenbaum

ACYPL

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NOMINEE INFORMATION

NAME _____

POSITION _____

ORGANIZATION _____

POLITICAL PARTY: _____ ELECTED: _____ APPOINTED: _____ BIRTHDATE: _____

BUSINESS ADDRESS _____

CITY _____

STATE _____

ZIPCODE _____

EMAIL _____

BUSINESS PHONE _____

CELL PHONE _____

What special background, qualities, or experience does this nominee have that would make him or her a good ACYPL delegate?

NOMINATOR INFORMATION

NAME, POSITION AND ORGANIZATION _____

BUSINESS ADDRESS _____

CITY _____

STATE _____

ZIPCODE _____

BUSINESS PHONE _____

CELL PHONE _____

ALUMNI COUNCIL MEMBERSHIP: ANNUAL _____ CHARTER _____

OTHER ACYPL INVOLVEMENT: _____

ACYPL reserves the right to verify each nomination with stated delegate nominators.