NYWFIA
~MEMBER OF THE YEAR~

PLEASE TAKE A MOMENT TO COMPLETE A NOMINATION FORM TO RECOGNIZE SOMEONE THAT YOU BELIEVE **"GOES ABOVE AND BEYOND"** OR **"THAT EXTRA MILE"**

MEMBER OF THE YEAR NOMINATION FORM

NOMINEE'S NAME:_____

NOMINEE'S COUNTY: _____

REASON FOR NOMINATION: (MINIMUM 2-3 Paragraphs)

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NOMINATED BY: (PLEASE INCLUDE CONTACT PHONE # OR EMAIL ADDRESS FOR POSSIBLE FOLLOW UP)_____

_____

*****COMPLETED FORMS SHOULD BE E-MAILED TO 2ND VICE PRESIDENT CINDY BLY (BlyC@co.chautauqua.ny.us) AND YOUR RESPECTIVE REGIONAL REPRESENTATIVES.**