

Billings MVP Award Nomination Form

Nominee Name: _____

Nominee Address: _____

Nominee Telephone: _____ **Email:** _____

Nominee Occupation: _____

Attach additional sheet(s) with the following information:

1. Describe activities and/or programs that demonstrate advancement of the FFNHA Goals and adherence to FFNHA Guiding Principles. Include key dates and contacts/references with which the nominee is/was involved.
2. Identify how the activities performed by the nominee have advanced FFNHA.
3. Describe why the advocacy award is deserved by the nominee.
4. Enclose 3-12 digital photos illustrating the nominee and representative projects/activities. Written descriptions should accompany each photo submitted.

Nomination Submitted by: _____ **Date:** _____

Address: _____

Telephone: _____ **Email:** _____