



# Excelsior Nomination Form

Additional comments and supporting documentation may be included on supplemental pages, if necessary. You may reproduce this form. In order to be considered for judging, form must be legible.

Nomination Forms due Friday, November 9th at 5PM.

Completed forms can be mailed or delivered to:  
**Mkt. Dev., Rockford Register Star, 99 E. State St., Rockford, IL 61104**

I would like to nominate: \_\_\_\_\_  
(Organization Name)

Address: \_\_\_\_\_  
(Number and Street) (City) (State) (Zip)

Phone Number: \_\_\_\_\_

Officers: \_\_\_\_\_  
*President or Executive Director*  
*(Head of local org.)*

\_\_\_\_\_ *Vice President or Executive Director*  
*(Second in charge)*

Organization philosophy:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Overall impact on community:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Constructive achievements:  
Date Achievements  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Nominator name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone Numbers: \_\_\_\_\_  
(Home) (Business)