Charlotte Glaser Award of Merit

Awarded for outstanding contribution to the Kentucky Society of Certified Public Managers®

NOMINATION FORM

The nominee must be a member in good standing of the Kentucky Society of Certified Public Managers®.

Nominee Information:	
Name:	
Title:	
Cabinet/Agency:	
Mailing Address:	
Work Phone:	Email:
POSSIBLE REASONS	FOR NOMINATION:
 Exceptional level 	el of service to the Kentucky Society of Certified Public Managers®
 Excellent CPM 	role model
 Promotes and s 	supports Society functions
 Far exceeds ex 	pectations of a Society member
 Frequently perfe 	orms above and beyond the call of duty
 Exhibits long te 	rm dedication to the Society
If additional space is ne	eded, please attach another sheet.
Nominator's Informati	<u>on:</u>
Name:	
Title:	
Cabinet/Agency:	
Mailing Address:	
Work Phone:	Email:

Date

Signature of Nominator