Nominee Information:

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®.

Signature of Nominator			Date	
WORK P	none:	Em	ail:	
Mailing Address: Work Phone:			ail:	-
	/Agency:			
Title:				
Name:				
Nomina	ator's Informatio	<u>on:</u>		
	_	d, please attach another sheet.		
				_
				_
I am no	minating this CPI	M for the Award of Merit for the following r	easons: (Please be specific.)	_
•	Exhibits long term	dedication to the Society		
 Frequently perfo 		ms above and beyond the call of duty		
•	Far exceeds expec	tations of a Society member		
•	Promotes and supp	ports Society functions		
•	Excellent CPM ro	le model		
•	Exceptional level	of service to the Kentucky Society of Certified	l Public Managers®	
POSSIE	BLE REASONS F	OR NOMINATION:		
Work P	hone:	Em	ail:	
Mailing	Address:			
Cabinet	/Agency:			
Title:				
Name:				