



# YOUTH CITIZEN OF THE YEAR NOMINATION FORM

Name of Nominee \_\_\_\_\_

Date of Birth \_\_\_\_\_ Age \_\_\_\_\_

Address \_\_\_\_\_

Telephone Number(s) \_\_\_\_\_

(daytime)

(evening)

Name of Parent/Guardian \_\_\_\_\_

Please state the reasons for the nomination (outline how this individual meets and/or exceeds the criteria) with specific examples.

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Is a supporting nomination video included?  Yes  No

If you answered yes, the completed parent/guardian consent form is mandatory for this nomination to be considered.

Nominator's Name \_\_\_\_\_

Address \_\_\_\_\_

Telephone Number(s) \_\_\_\_\_

(daytime)

(evening)