



**NOMINATION FORM OUTSTANDING STATE
LEAGUE COUNSEL AWARD Fax Completed Form to
(202) 785-0152**

Please submit any additional pages if you feel there is not enough room on this form to provide a sufficient answer to any of the questions below.

NOMINATOR INFORMATION

Name(s): _____
Street _____ Address: _____
City, _____ State, _____ Zip: _____
Telephone: (day) _____ (evening) _____
E-Mail: _____

NOMINEE BASIC INFORMATION

Full Name: _____
Title: _____
State League or Association Name: _____
Is Nominee in-house or outside counsel to the state league/association? In-house Outside
If outside counsel, who is nominee's employer?: _____
Education (beyond high school): _____

Years in legal practice (total): _____
Years in legal practice representing state league/association: _____

NOMINEE DESCRIPTIVE INFORMATION

1. Legal scholarship: (Please cite [or enclose, if feasible] publications, legislative drafting examples, briefs, opinions): _____

2. Please describe the demonstrated commitment of the nominee to the practice of local government law AND exceptional accomplishments by the nominee in serving the nominee's association:

3. Please provide examples of the nominee's demonstrated commitment to serving the state league/association members, such as providing local government law education to the nominee's members: _____

4. Service to the legal profession and the public, above and beyond his or her occupational duties (include, for example, membership in and offices held in bar associations and other relevant professional organizations; *pro bono publico* work):

5. Other Awards and honors received (including but not limited to fellowships and scholarships):

_____ **Signature of Nominator**

_____ **Date of signature**