## FLORIDA CIVIL RIGHTS HALL OF FAME



### **NOMINATION FORM FOR 2017 PROGRAM**



**DEADLINE: July 15, 2016** 

Part I – Nominee/Nomi	nator Information: (please print)
Nominee's Name	
Address	
City, State, Zip	
Area Code/Telephone	- <u></u>
Fax Number (optional)	
Email Address	
Birth Year (if deceased, also pr	ovide year of death)
Complete the nominator inform	mation below if different from the nominee:
Address	
City, State, Zip	
Area Code/Telephone	
Fax Number (optional)	
Email Address	
Part II – Nominee Eligib	ility (please check appropriate response)
	No (if no, nominee is not eligible for this award)
Nominee was born in operation	n Florida or adopted Florida as his or her home state and base of
Yes	No (if no, nominee is not eligible for this award)

### Part III – Summary of Nominee Qualifications

Provide a brief summary statement about the nominee that describes his or her outstanding accomplishments and contributions to civil rights in Florida.

# **Part IV – Nominee Activities/Accomplishments** (complete the following information for each activity listed)

- Description of activity/accomplishment (social, professional, etc.)
- > Date(s) if applicable for a specific event. If efforts are ongoing, please indicate.
- Location of Activity: City, state, community, neighborhood where event(s) took place
- ➤ Beneficiaries/Recipients (community residents, organization members, school, neighborhood, association, etc.): Specify who benefited from the nominee's efforts, including the number of beneficiaries (if known)
- Results/Benefits of Activity: Be specific and include documentation supporting activity success

#### Part V – Nominee Awards

List any awards that pertain to the nominee's contribution to civil rights.

### Part VI - Nominee Publications and Other Communications

List any publications and/or communications (books, articles in periodicals, newspapers, TV shows, etc.) that the nominee wrote, organized, appeared on or to which the nominee contributed. Include source information (website address or bibliographical reference as appropriate). Electronic and scanned versions of newspaper or magazine articles are also accepted.

### Part VII - Nominator's Acknowledgement

I understand that to the best of my knowledge:

- This information is factual and if any is found not to be factual, the nomination is null and void.
- This nomination form and accompanying materials will become the property of the Florida Commission on Human Relations and will not be returned.
- I acknowledge that the Commission may notify the nominees or their representatives to request more information and may arrange for and conduct an interview (in-person or via phone).
- The Commission has the right to use any information about the nominees in press releases, annual reports, publications and other communications as deemed appropriate by the Commission.

Signature	 	 
Printed Name	 	 
Date Signed		

\* \* \* \* \* \* \* \* \* \*

The completed nomination form should be no more than ten (10) typed or handwritten pages in length.

You may also include a maximum of five (5) supporting optional attachments (newspaper and magazine articles, book reviews, award presentations, etc.)

Compact disks (CDs) are acceptable. Do not send audio or videotapes; however, you can refer to a website (provide the complete web address) that has audio/visual components.

Due to reproduction quality, we cannot accept faxed submissions.

If you have any questions about the program or completing this form, email the Commission at Florida\_crhof@fchr.myflorida.com.

Completed nomination packets with supporting materials should be emailed no later than midnight <u>JULY 15, 2016</u> to Florida\_crhof@fchr.myflorida.com or mailed (<u>4</u> copies of CD or hardcopy required) with a *postmark* date of no later than <u>JULY</u> 15, 2016 to:

Florida Civil Rights Hall of Fame Award Coordinator Attn: Frank Penela, Communications Director Florida Commission on Human Relations 4075 Esplanade Way, Suite 110 Tallahassee, Florida 32399