

Awards Submission Form
2024 LERN AWARD NOMINATION

NOMINATION CATEGORY - Check one:

- A _____ CATALOG/BROCHURE/SCHEDULE
- B _____ PROGRAMMING
- C _____ MARKETING
- D _____ COMMUNITY SERVICE
- E _____ MANAGEMENT PRACTICE
- F _____ BUSINESS and INDUSTRY

Please submit this information as you would like it to appear on your award, if you are selected.

Name of person submitting entry _____

Organization _____

Size of community serviced (population) _____

Address _____

City, State, Zip _____

Website _____ Email _____

Telephone (_____) _____ Fax (_____) _____

I understand that all entries become the property of LERN and LERN reserves the right to publish information from the entries unless specific written instructions not to do so are included with each entry. I understand that there must be a representative at the conference to accept the award if my nomination is selected as a first place winner.

EMAIL TO: info@lern.org

Signature of applicant