

ILLINOIS STATE CRIME STOPPERS  
LOCAL PROGRAM  
AWARDS NOMINATION FORM FOR  
BOARD MEMBER OF THE YEAR



Nominee for **Outstanding Board Member of the Year**

Name \_\_\_\_\_

Program \_\_\_\_\_

How long has this person been affiliated with your local program? \_\_\_\_\_

How has this candidate contributed to the success of your local program?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Will the recipient be attending the state conference? YES \_\_\_\_\_ NO \_\_\_\_\_

Program Submitting Nominee \_\_\_\_\_

Name \_\_\_\_\_

Street Address (No P.O. Boxes) \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Phone \_\_\_\_\_

Print or Type – Can be on separate sheet of paper  
All requested information **MUST** be submitted for consideration.