

SEAALL LIFE MEMBER NOMINATION FORM

THIS INFORMATION IS SUBMITTED TO SUPPORT THE NOMINATION OF:

Nominee's Name: _____

Title: _____

Address: _____

NOMINATION SUBMITTED BY:

Nominator's name: _____

Address: _____

Phone: _____ **E-Mail:** _____

Signature of Nominator: _____ **Date:** _____

This form should accompany the supporting documentation. Nominations must include biographical data and significant contributions to SEAALL. If at all possible include: documents, testimonials, news stories or other similar supporting evidence. As required by the Bylaws, the nominee must have belonged to the chapter at least 10 years, have reached the age of fifty-five years, unless retirement was due to ill health, have retired from full-time active library work, as well as significant service to the chapter.

Nominations should be sent to the current chair of the Membership Committee.