

Retiree Council 8 • Mike Corn Award

HONOREE NOMINATION FORM

DATE: _____

NAME of LOCAL: _____

NAME of HONOREE: _____

NAME of PERSON NOMINATING HONOREE: _____
Phone # _____

DESCRIPTION OF SERVICE:

Please submit a brief (100 words) description of why your Association is recognizing the honoree in the space provided below or on a separate sheet of paper for publication in the program. Criteria used will be: Involvement in union activities; political activities; community service.

PLEASE RETURN COMPLETED REGISTRATION FORM BY APRIL 1ST TO:

NYSUT URO, 7 Ellinwood Court, New Hartford, NY 13413
If any questions, contact Jan Corn at (315) 869-9808 or jdhcorn@gmail.com