



Nomination Form

Name of person nominated: _____

Address: _____

City: _____ State: _____ Zip: _____

Telephone: _____ Fax: _____

1. How long and in what capacity have you known the applicant?

2. Explain why you are nominating the applicant for Leadership Tomorrow.

3. Is the applicant aware you are nominating them for the class? _____

Nominator: _____ Date: _____

Organization: _____ Title: _____

Mail to: Hall County Leadership Unlimited, Inc.

PO Box 1486

Grand Island, NE 68802

308-382-9210 Fax: 308-382-1154 Email: jworthington@leadershiptomorrow.com

Hall County Leadership Unlimited will inform the nominee of his/her nomination and will provide him/her with an application form. Information contained in the nomination form will be kept confidential.

Return form by: April 15 to allow time for the nominee to complete the application process by April 30.