

Association of West Virginia Solid Waste Authorities

VOLUNTEER OF THE YEAR

NOMINATION FORM

NOMINEE: _____

TITLE: _____

COUNTY OR REGIONAL SWA: _____

CITY/STATE/ZIP: _____

Please have all information typed.

Each entry should include:

- Summary page highlighting nominee's background and achievements
- Narrative on SWA projects, obstacles that were overcome, SWA background and experience (no more than five pages)
- One 8" x 10" photograph of nominee
- Any additional information which you feel would be beneficial to the judges in making their decision

SWA member making this nomination:

Name: _____

Title: _____

Address of SWA member making this nomination: _____

City/State/Zip: _____

Phone number: _____