



NOMINATION FOR WAFCS PROFESSIONAL OF THE YEAR

Nominee _____

Home Address _____

Home Phone _____ **E-mail** _____

Position or Title _____

Business _____

Business Address _____

Phone _____ **E-mail** _____

Describe the position held by the nominee

What unique role(s) career has the nominee achieved as a family and consumer sciences professional?

How has the nominee served as a role model within the profession?

How does the nominee recruit new professionals and present the profession to others?

How has the nominee influenced our profession outside the family and consumer sciences community?

Briefly state any additional information the recognition committee should know regarding the nominee.

Person/Group Making Nomination: _____

For Further Information, Contact: _____
Email: _____
Phone: _____

For information, mentoring in completion of this application, contact:
Karen Bergh, (360) 402-3527, berghkm@gmail.com

Send the completed application to:
Karen Bergh
WAFCS Awards/Recognition Chair
434-100th Avenue SE
Olympia, WA 98501