

CALIFORNIA SCHOOL EMPLOYEES ASSOCIATION

Outstanding Service Award

NOMINATION FORM

Name of Nominee _____

Home Address _____ ZIP _____

District _____

Position _____ Chapter _____ Region _____ Area _____

Nominated by (please check appropriate box):

Chapter _____
Name and Number

Board Member _____ Office _____ Area Director _____ Area _____

Committee Chair _____ Committee _____ Regional Rep _____ Region _____

Name of Nominator _____ Daytime phone# _____

Date _____

ELIGIBILITY (Policy 906.2):

- Any person shall be eligible for an Outstanding Service Award.
- The nominee should have performed a service for the students, member, chapter, Association, school district, or community which is clearly outstanding and far beyond what is normally expected.

Please note: A complete and detailed statement outlining the services performed by the nominee which constitutes the basis for the nomination is required.

Please be sure the back of this form fully describes why you believe the nominee deserves recognition.

You may submit your completed form several ways:

- Email to: awards@csea.com
- Mail to: Awards Committee 2045 Lundy Avenue, San Jose, CA 95131
- FAX to: (408) 432-6249 – be sure to call (800) 632-2128, ext. 1341 to make sure the fax went through successfully.

Please be sure to describe in detail why this nominee should be recognized.

Use additional sheets, if necessary.