

# 2010 ATHENA® AWARD NOMINATION FORM

Today's Date: \_\_\_\_\_ SUBMISSION DEADLINE: **January 22, 2010**

## Your Contact Information:

Name: Mrs./Ms./Mr. \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

## Nominee's Contact Information (Professional):

Mrs./Ms./Mr. \_\_\_\_\_

Title or Position \_\_\_\_\_

E-mail Address \_\_\_\_\_

Business Phone (\_\_\_\_\_) \_\_\_\_\_ Fax (\_\_\_\_\_) \_\_\_\_\_

Company \_\_\_\_\_

Business Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Below, briefly describe why you feel this person deserves this award, as it relates to the ATHENA® Criteria (Assisting Women in Reaching Their Full Leadership Potential, Professional Accomplishments, Community Service, etc.). (Limit to 200 words):