

NCPH Award Nomination Cover Sheet

Award: _____

Project/Nominee: _____

Please provide full contact information for the nominator and all award nomination participants.

Nominator/Main Contact: _____
Address: _____
Address: _____
City/State/Zip Code: _____
Phone: _____
Email: _____

Nominee 1: _____
Address: _____
Address: _____
City/State/Zip Code _____
Phone: _____
Email: _____

Nominee 2: _____
Address: _____
Address: _____
City/State/Zip Code _____
Phone: _____
Email: _____

Nominee 3: _____
Address: _____
Address: _____
City/State/Zip Code _____
Phone: _____
Email: _____

Nominee 4: _____
Address: _____
Address: _____
City/State/Zip Code _____
Phone: _____
Email: _____

If you have more nominees please continue on the back page. Please note: only the person listed as the Nominator/Main Contact will be notified if the submission does not receive an award. Self nominations are welcome.

If the nominee is an organization or institution, please provide the number of paid staff and budget.

Number of paid staff: _____

Institutional budget: _____

Thank you

Refer to our website for detailed guidelines for each award. www.ncph.org

Questions? Please contact us at ncph@iupui.edu or 317-274-2716.