## Town Clerk of the Year Award Nomination Form

Name	Name of Town Clerk:		Date:
Munic	cipality:		Years in current position:
	making your nomination, please ing criteria. Where possible, prov		s describing how the nominee meets the the statements.
1.	Demonstrated active involvement	ent in the Massachusetts	; Town Clerks Association
2.	Demonstrated achievements o	of the nominee and the w	ork for which he/she is being nominated
3.	Demonstrated commitment an	nd professionalism to the	position
4.	Demonstrated community invo	olvement and commitmen	nt to the cause of good local government
5.	Recognized as a Clerk who displays characteristics of integrity and leadership, and who has received the respect and confidence of his/her peers		
Nominated B Name: Address: Relationship t	to Town Clerk:	Organization: Phone:	Email:
Signature		Date:	