ECASE DISTRICT CLERK SERVICE TO EDUCATION AWARD SPONSORED BY WEBSTER SZANYI

NOMINATION FORM

Criteria:

- M o - M - U	Involvement with other professional associations Attended trainings and workshops for professional development
Name of Nor	ninee:
Address:	
	State: Zip:
Nominated b	y:
Address:	
	State: Zip:
Phone:	Fax: Email:
	TTACH ADDITIONAL PAGES IF NECESSARY.
Return via m	ail/Fax/e-mail to: ECASB Executive Board c/o David L. Lowrey 355 Harlem Road West Seneca, New York 14224

Fax: 821-7296; email dlowrey@e1b.org

Improvements in Board Operations:

Involvement with ECASB or Mentoring Other District Clerks:

Other Community Groups / Professional Associations:

Professional Development Attended or Presented:

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