

OUTSTANDING CHAPTER MEMBER OF THE YEAR NOMINATION FORM

Nominator

Every year WOVI women are recognized for outstanding contributions to their chapter and to the organization. To honor an outstanding chapter *member*, please complete the form below. This is an incredible opportunity to nominate a woman in your chapter who attends regularly, is involved in chapter activities, and seeks to fulfill the mission, vision, and values of WOVI, Inc. Additional comments may be added to further support your nomination.

DEADLINE FOR SUBMITTING THE NOMINATION FORM IS SEPTEMBER 18

Nominee

Name:		
Chapter Affiliation:		
Email:		
Phone Number:		
This portio	on to be completed by the Chapter Ad	ministration/Leadership
Nominee attendance?		
Guests brought?		
Dues paid?		
Members sponsored?		
Other Participation: Confe	erence, Leadership Summit, Leadersl	Rings, Special Events?
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-	500 words or less, please provide a	response to the items listed below. Use
additional sheets if needed.		
\sqcap Why are you nominating	this WOVI member?	
☐ How does the nominee se	rve the chapter and actively promote	the WOVI mission, vision and values?
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