

SALEM DAYS

**NOMINATION FORM**  
**COMMUNITY SERVICE**  
**AWARD**

Name of Candidate\_\_\_\_\_

Address\_\_\_\_\_

Phone\_\_\_\_\_

Organization or Individual Sponsoring Candidate:

Name\_\_\_\_\_

Address\_\_\_\_\_

City\_\_\_\_\_

Phone\_\_\_\_\_

Reason for nominating  
candidate\_\_\_\_\_

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