



DISTINGUISHED SERVICE AWARD NOMINATION FORM

Purpose: To identify, recognize and award those individual members of the Alumni Association who go beyond the call of duty in carrying out the work of the association through their local chapters, and in so doing bring favorable recognition to the association and to Mississippi State University. Those rare individuals who stand ready to serve in the best interest of Mississippi State and the Alumni Association; those who take the initiative to see that various chapter alumni activities, membership drives and other University projects are successfully carried out; those who continually promote Mississippi State by encouraging youngsters to visit the university and to enroll; those who do such things because of their love for Mississippi State: these are the people who are intended to be so recognized.

I. CANDIDATE'S FULL NAME: _____

II. DATE OF BIRTH: _____ BIRTHPLACE: _____

III. OCCUPATION: _____

IV. CANDIDATE'S FAMILY: List spouse's name (maiden name for ladies), children's name(s) and ages. Indicate if any attended MSU.

V. EDUCATION:

A. Colleges/universities attended:

School	Years Attended	Years Graduated	Degree
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

B. List organizations (with offices held) and awards and honors received while at the school(s) listed above.

VI. CANDIDATE'S RECORD OF SERVICE:

A. List here (use a separate sheet of paper if needed) the candidate's service to MSU and to the Alumni Association. Be as specific as possible concerning dates of offices held, etc.

B. List here (use a separate sheet of paper if needed) other information such as outstanding traits, actions or deeds which will be beneficial to the candidate's nomination.

VII. NOMINATOR'S STATEMENT:

I am pleased to nominate _____ for the MSU Alumni Association's Distinguished Service Award.

Signed: _____

Class year or year(s) attended MSU (if applicable): _____

Address: _____

Phone Number: _____ Date: _____

Please return this form to the MSU Alumni Association by November 3, 2006.

Attention: Chapter Programs, P.O. Box AA, Mississippi State, MS 39762-5526,
Or send by fax to 662-325-8425

<http://www.alumni.msstate.edu/chapters/distservice.pdf>