Mississippi Library Association- Library Champion Award
Nomination Form

Name of Nominee: _____

Nominee is an (Please circle one): **Individual** **Business**

Organization **Group**

Title: _____

Address: _____

Telephone #: _____

E-mail Address: _____

Reason for Nomination (Please use back of sheet, if needed):

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Name and Title of Person Making Nomination: _____

Contact Information For Person Making Nomination

Address: _____

Phone #: _____

E-mail Address: _____