MISSISSIPPPI LIBRARY ASSOCIATION

OUTSTANDING ACHIEVEMENT AWARD

I HEREBY NOMINATE THE FOLLOWING PERSON FOR THE OUTSTANDING ACHIEVEMENT AWARD:

Nominee: _____
Library: _____
Address: _____
_____
City: _____State: ___Zip: _____
Nominees Position: _____
_____

Awards, accomplishments and contributions to library development in Mississippi. Attach additional sheet if necessary.

_____

http://www.misslib.org/
601.981.4586 Fax 601.981.4501

Mail completed nomination form to MLA – ATTN: Awards Committee - P.O. Box 13687,Jackson, MS 39236-3687 or email to info@misslib.org
Deadline is September 1.

Remarks: _____

_____

Nomination submitted by : _____
_____
Address: _____
_____
City: _____State: ___Zip: _____
Date: _____