

**MISSISSIPPI 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: _____