SERVICE TO CHILDREN AWARD

ELEMENTARY & SECONDARY DIVISIONS

NOMINATION FORM

Nominee's
Name: _____ Home Phone: _(____)_____

Address: _____
Street City Zip Code

Nominee's email (if applicable): _____

School & School District Served: _____

_____

This volunteer is deserving of this honor for the following reasons:

_____
_____
_____
_____
_____
_____
_____
_____

(Please feel free to attach additional information)

Nominated by: _____

Address: _____

_____

Telephone: _(____)_____

Email: _____

RETURN FORM TO: **Margaret S. Foster, President-Elect & Awards Chairman**
PAESSP
122 Valley Road, P.O. Box 39
Summerdale, PA 17093

NO LATER THAN MAY 7, 2010