SPECIAL CONTRIBUTIONS TO INDIAN EDUCATION AWARD NOMINATION

The Special Contributions to Indian Education Award is given to a professional who has made significant contributions toward improving the educational experience for American Indian Students at The University of Arizona (UA). Previous award winners have been recognized for teaching, student support, mentoring, community outreach, and philanthropic efforts. The award recipient will receive a commemorative award and joins the esteemed group of previous award winners. The award presentation will take place in the evening at the American Indian Alumni Homecoming Reunion on October 28, 2016 to be held in Tucson, Arizona. **Attendance is required.**

**CRITERIA:** The nominee does not have to be affiliated with the UA, but must demonstrate a commitment and previous experience in furthering educational opportunities for American Indian students at the UA. Philanthropists are eligible for this award. Nominee does not have to be American Indian.

**NOMINATION PACKET MUST INCLUDE:**
- Nominee’s current resume
- A letter of recommendation highlighting the nominee’s exemplary work/contributions to the campus community or students
- Special Contributions to Indian Education Nomination Form

**DEADLINE: Friday, September 16, 2016**
Submit nomination to:
By Mail: American Indian Alumni Club
ATTN: Awards Committee
P.O. Box 2101091, 1111 North Cherry Avenue, Tucson, AZ 85721

By Fax: (520) 621-9030
By Email: csm15@email.arizona.edu

**Nominee Information:**
Full Name: ____________________________________________________________
Tribe: _________________________________________________________________
Year(s) attended UA: ___________________________ Graduation Year: __________
College/Program: ___________________________ Type of Degree: _______________
Mailing Address: _________________________________________________________
Home/Cell Phone: ___________________________ Work Phone: __________________
Email: ________________________________________________________________

**Nominator Information:**
Full Name: _____________________________________________________________
Mailing Address: _________________________________________________________
Home/Cell Phone: ___________________________ Work Phone: __________________
Email: ________________________________________________________________

**Business/Company Name:** _______________________________________________

*I, the nominator, hereby certify the information on this form is true and correct to the best of my knowledge.*

Signature: ___________________________ Date: ________________________________

**QUESTIONS?** Contact Chad S. Marchand, AIA Club President at 509-429-7490 or via email at csm15@email.arizona.edu