

## LQG Awards Nomination Form

Deadline for nominations is February 1<sup>st</sup>

Must be postmarked on or before February 1<sup>st</sup> or

hand delivered to LQG President by February 1<sup>st</sup>.

Mail to: LQG Awards, PO Box 6861, Lincoln, NE 68506

Please nominate individuals or groups on separate forms, as they are kept on file separately. You may copy this form. You may use additional sheets of paper if necessary. Please remember that the committee members may not be personally aware of your nominee's efforts, so be specific when detailing your reasons for the nomination. If your nominee is not selected this year, the file will be retained for future consideration. A nomination MUST be received in the current year in order for that past nomination to be reconsidered. The committee reserves the privilege to designate the appropriate award category for each nominee.

LQG Life Member – This is the highest honor given to an LQG member. It is awarded for a lifetime of achievement and significant contributions to the Guild. (This is an award the is infrequently given.)

LQG Bright Star Award – This is given to members for consistent achievement and continuing involvement for the betterment of the Guild over a period of time. (For achievement beyond the Shining Star level, but less than the level for a Life Member Award.)

LQG Shining Star Award – This is given to members for a significant contribution to the Guild. (It may be for a single project or for an ongoing project.)

Nominee Name \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

1. Which award do you feel your nominee deserves? \_\_\_\_\_

2. Explain how your nominee meets or supports the mission of LQG. Refer to your Membership Book, "Purpose of LQG". \_\_\_\_\_

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3. Please describe what you feel is your nominee's main contribution to LQG and the quilting world.

\_\_\_\_\_

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4. How long has your nominee been active in quilting? \_\_\_\_\_

5. In what capacities has your nominee served LQG? Committee chair, officer, other volunteer venues. \_\_\_\_\_

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6. Any other supporting details? (i.e., scholarly writer, quilt maker, researcher, organizer, conservator) \_\_\_\_\_

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Nominator Name \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Phone Day \_\_\_\_\_ Night \_\_\_\_\_