



The Shreveport Mayor's Women's Commission

HERA Award Nomination Form

Nomination Deadline: October 17, 2011. Please mail nominations to Shreveport Mayor's Women's Commission, c/o Ms. Burnadine Anderson, Office of the Mayor, City of Shreveport, P. O. Box 31109, Shreveport, LA 71130. Nominations postmarked after the deadline will not be considered. Awards will be presented November 10, 2011.

INFORMATION ON NOMINEE		
Note: The nominee must be a female resident of Shreveport and/or work in the City of Shreveport		
Nominee is nominated as an UNSUNG HERO for one of the following categories: <i>(please check one)</i>		
Advocacy	Education	Quality of Life
Name:		Home Phone No.
Home Address:		Cell Phone No.
Home City, State:		Zip Code:
Employer's Name:		Title at Work:
Employer's Address:		Work Phone No.
Employer's City, State:		Zip Code:
Home E-Mail:	Work E-Mail:	
<p>This award is to honor women who have exhibited outstanding dedication and commitment to participating in programs that benefit Shreveport women and youth. Please check all of the following that apply to your nominee:</p> <p>_____ Has demonstrated an outstanding commitment to volunteerism</p> <p>_____ Is a positive influence in meeting community needs or enhancing the quality of life in Shreveport</p> <p>_____ Has demonstrated acts of generosity and kindness</p> <p>_____ Embraces community service as an ongoing commitment</p> <p>_____ Contributions should have been made within the past 12 months, as well as ongoing efforts which demonstrate a depth of commitment</p> <p>_____ Promotes and/or advances public understanding about important community issues/concerns</p> <p>_____ Demonstrates high standards of character and moral standing</p> <p>_____ Fosters coordination and cooperation among diverse audiences and stakeholders in the community and promotes unity</p> <p>Please provide a summary of the activities, services and accomplishments of the nominee on a separate page and include with this Nomination Form. Summary should not exceed 500 words.</p>		
Contact Information for Individual Making this Nomination		
Name:		Home Phone No.
Work Phone No.	Cell Phone No.	Email: