



---

## Champions of Central- Resident nomination form

Please submit completed forms to [rbunton@socfcleveland.org](mailto:rbunton@socfcleveland.org)

### Name and information of the person being nominated (nominee):

Name: \_\_\_\_\_

Phone number: (\_\_\_\_) - \_\_\_\_ - \_\_\_\_\_

Email address: \_\_\_\_\_

*Please include a few sentences on why you are nominating this person as a Champion of Central (add additional paper as needed):*

### Name and contact information of the person making the nomination

(nominator):

Name of person making the nomination: \_\_\_\_\_

Nominator's phone number: (\_\_\_\_) - \_\_\_\_ - \_\_\_\_\_

Nominator's email address: \_\_\_\_\_