



WISCONSIN WOMEN IN GOVERNMENT, INC.

WWIG Women of Distinction Form

Thank you for submitting a nomination for the WWIG Women of Distinction Award. At this year's banquet, we will be honoring women in government who have played a vital role in promoting women's health issues in Wisconsin. Please provide the following information about your nominee. Nominations must be received by **April 1, 2010**.

Person Submitting

Nomination: _____

Address: _____

Phone: _____

Email: _____

Nominee: _____

Address: _____

Phone: _____

Email: _____

Employer/Occupation: _____

Nomination Narrative: Please describe the significant accomplishments and/or "firsts" of the nominee. Specifically address the role that the individual has played in promoting women's health issues in the state of Wisconsin. Attach additional sheets if necessary.

Nominators Signature: _____ Date: _____

Please return by **April 1, 2010** to: info@WiscWomenInGovernment.org or WWIG, Attn: Awards Committee, P.O. Box 2543, Madison, WI 53701