

NOMINATION FORM

I hereby submit the name of the following individual, business, group or organization in consideration for the Cuyahoga Falls City Schools **Friend of Education Award**:

| Select the Category of Nomination: Individual Business Non-Profit Group or Organization | | | |
|---|------------------------------------|---------------------------------|------------------------|
| Nominee | Title/Position (if n | ominating an individual) | |
| Contact Person (if nominating a business of | or organization) | | |
| Address | City | State _ | Zip |
| Phone | Email | | |
| Provide a statement indicating the reason for Documents and other materials that suppostatement, please answer the three questions. | rt your nomination ma | | |
| Statement of Rationale | | | |
| In what ways has the nominee served the school/district and for how long? | | | |
| Describe the impact or benefit that the n | ominee has had on a | classroom, school, program, | and/or district. |
| What defining characteristic sets this not who have served our district? | minee apart from othe | er individuals, businesses, gro | oups, or organizations |
| | | | |
| Nominated by | | 01.1. | |
| Address | | State _ | Zip |
| Phone What is your position in the Cuyahoga Falls | _ Email c City School District? |) | |
| Building: | S City School District | | |
| DeWitt Lincoln Preston Price | Richardson | Silver Lake Bolich | Roberts CFHS |
| Signature | Date | | |
| Please submit the completed form, with any attachments, by email or mail to: | | | |
| | Friend of Ed Attn: Chris | ducation Jones | |

Attn: Chris Jones
431 Stow Avenue
Cuyahoga Falls, Ohio 44221
Email: cf_jonesc@cftigers.org