



Alumni Awards Nomination Form

Please read the entire description and criteria for each award before completing the form.

Return the completed form to:
Washington College, Office of Alumni Relations and Annual Giving
300 Washington Avenue, Chestertown, MD 21620
Fax: 410.810.7117 | Email: alumni_office@washcoll.edu

FOR NOMINATOR

Please include your contact information so that we may contact you with questions or to seek additional information.

Name of nominator: _____ Class Year: _____

Address:

Phone: _____ E-mail: _____

FOR NOMINEE

Please include as much information as possible including his or her complete full name and maiden name if appropriate.

Name of alumnus/a being nominated: _____ Class Year: _____

Address:

Phone: _____ E-mail: _____

I am nominating this alumnus/a for the: **(Please check one)**

_____ Alumni Citation for outstanding achievement in one's field of endeavor

_____ Alumni Service Award for outstanding service to Washington College

_____ Alumni Horizon Ribbon Award to a recent alumnus/a of the last 15 years for outstanding leadership, service or scholarship in a particular area

DESCRIPTION OF QUALIFICATIONS

Please convey why this alumnus/a is deserving of recognition by detailing his or her significant and notable service, accomplishments, or scholarship. Attach additional documentation as needed.