

*2015 Nomination Form*



*Women of*  
**Distinction**  
HONORING WOMEN IN NEW YORK

**SENATOR THOMAS F. O'MARA**

**848 Legislative Office Building, Albany, New York 12247 (518) 455-2091**

**2015 WOMEN OF DISTINCTION NOMINATION FORM**

**All nominations must be received by Monday, March 30, 2015**

Name and Address of Nominee: \_\_\_\_\_

Name of Nominating Individual: \_\_\_\_\_

Organization and Title of Nominating Individual: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Please provide the following nominee information:

Birthdate: \_\_\_\_\_ Place of Birth: \_\_\_\_\_

High School: \_\_\_\_\_ College: \_\_\_\_\_

Other Degrees and/or Certifications: \_\_\_\_\_

Academic Awards or Achievements: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Community, Civic or Business Awards and Recognitions: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Past & Present Community/Civic Involvement: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Volunteer Service: \_\_\_\_\_

\_\_\_\_\_

Military Service: \_\_\_\_\_

\_\_\_\_\_

Present Occupation: \_\_\_\_\_

\_\_\_\_\_

Past Relevant Occupations: \_\_\_\_\_

\_\_\_\_\_

Hobbies and Interests: \_\_\_\_\_

\_\_\_\_\_

Marital Status: \_\_\_\_\_ Children: \_\_\_\_\_

\_\_\_\_\_

Who or what were your nominee's major influences? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

What, if any, obstacles has your nominee overcome? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

