

**NADIIAA/JOSTENS COMMUNITY SERVICE AWARD**

**NOMINATION FORM**

[Use a separate form for each nomination and be sure to submit **four** (4) sets of nomination materials.]

Institution: \_\_\_\_\_

Conference Affiliation/Independent: \_\_\_\_\_

Please check (only one) the appropriate nomination category:

\_\_\_ One time project/activity    \_\_\_ An array of projects/activities    \_\_\_ On-going project/activity

Student-Athlete Group(s) Involved in Project/Activity: \_\_\_\_\_

\_\_\_\_\_

Approximate # of Student-Athletes Participating in the Project/Activity: \_\_\_\_\_

Dates/Duration of the Project/Activity (e.g., days, weeks, months): \_\_\_\_\_

Target Audience(s): \_\_\_\_\_

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Please attach a description (not to exceed three typed pages) of the project/activity to include:

- The objective(s) of the community service project/activity.
- The campus and/or community need(s) that was addressed by the project/activity.
- The impact the project/activity had on the target audience.
- The method in which the impact of the project/activity was evaluated.

Please attach any pertinent publicity (e.g., newspaper articles) that resulted from the project/activity.

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\_\_\_\_\_  
Chief Executive Officer's Printed Name

\_\_\_\_\_  
Chief Executive Officer's Signature

\_\_\_\_\_  
Athletic Director's Printed Name

\_\_\_\_\_  
Athletic Director's Signature

**NOMINATIONS MUST BE POSTMARKED BY FRIDAY, NOVEMBER 13, 2009.**

**[Faxes are not permitted]**

Submit to:

Gary Karner  
Wisconsin Intercollegiate Athletic Conference  
780 Regent Street  
Madison, WI 53715  
Fax: 608/265-3176

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