



Women: Leading · Educating · Mentoring
Women of Visionary Influence

NOMINATION FORM – 2019 MENTOR OF THE YEAR

(Member of WOVI and previous WOVI, Inc. Mentor of the Year recipients are ineligible.)

Nominee Information:

Name: _____

Title/Position: _____

Company/Organization (please use official name) _____

Address: _____

City/State/Zip Code: _____

Telephone: _____ Fax: _____ E-Mail: _____

Nominator Information:

Name: _____

Title/Position: _____

Company/Organization (please use official name) _____

Telephone: _____ Fax: _____ E-Mail: _____

Reason for Nomination: In 500 words or less, explain how the woman being nominated fits the above award criteria and why she should be named the 2019 WOVI, Inc. Mentor of the Year recipient. Completed applications should be returned to the following: **WOVI, Inc., Mentor of the Year Selection Committee, P. O. Box 803144, Dallas, TX 75380-3144 on or before September 30, 2019.**



Women: Leading · Educating · Mentoring

Women of Visionary Influence

NOMINATION FORM – 2019 MENTOR OF THE YEAR

(Member of WOVI and previous WOVI, Inc. Mentor of the Year recipients are ineligible.)

Name of

Nominee: _____

Nominator: _____

Company: _____

Explanation: