

Please complete the following application along with written explanation on page 2 & 3. <u>Nominee Information</u>:

Name:			
Title/Position:			
Company/Organizatio	•	l name): _	
Address:			
City/State/Zip Code:			
Telephone:	Fax:	Email:	
Nominator Inform	ation:		
Name:			
Title/Position:			
Company/Organizatio	on (please use officia	l name): _	
Telephone:	Fax:	Email:	

On the following pages explain your reason for nomination: Complete the six sections, explaining how the woman being nominated fulfills the requirement and why she should be named the WOVI, Inc. Mentor of the Year. You may also include photos and links to her webpage to illustrate her accomplishments. Completed applications should be returned to:

WOVI, Inc., Mentor of the Year Selection Committee, P. O. Box 803144, Dallas, TX 75380-3144, <u>on or before September 30, 2020. (Or submit electronically to wovimrl@gmail.com</u>

Mentor of the Year Nomination for:

Nominee:	-
Nominator:	-
Company:	

Explain how your Nominee meets the following criteria:

1. She clearly encourages and motivates women to excel in the workplace. (50 words or less)

2. She provides special value to the workforce and/or the company. (50 words or less)

3. She impacts measurable growth in others that affects the company's bottom line or the community. (50 words or less)

4. She demonstrates leadership skills resulting in enhancement of work and/or community life. (50 words or less)

5. She exemplifies mentoring traits that bring about positive change and adds value to the lives of others. (50 words or less)

6. Finally, explain why your nominee should be named the 2020 WOVI, Inc. Mentor of the Year recipient. (50 words or less)

Thank you for nominating this worthy woman for the WOVI Mentor of the Year! SUBMIT