CHARACTER TRAIT NOMINATION FORM

"APPRECIATION"

Recognizing the quality, value, significance of people & things.

Name of Nominee: _____
Address:_____
Phone:_____Email:_____

REASON FOR NOMINATION:

Date of Event:_____Place of Event:_____
Primary Source Supporting Event: Eyewitness / Video / Newspaper / Other_____

PROVIDE A DETAILED EXPLANATION IN 300 WORDS OR LESS:

Your Name:_____

Return Form to: Roby Little at Lee's Summit CARES 901 NE Independence, Lee's Summit Mo. 64086 or email them to rdlittle@rediscovermh.org