CHARACTER TRAIT NOMINATION FORM

"SELF-CONTROL"

Choosing to manage one's emotions, desires, or actions & respecting the boundaries of others.

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:

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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