2021 President’s Award Nomination Form

*Required Organizer Information:* (AFN will contact you if your nominee is selected.)

Name ___________________________ Phone: ___________________________

Address ___________________________ City: ______ State: ______ Zip: ______

Email ___________________________

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**Please check one Award category for which you are nominating:**

- □ Culture Bearer
- □ Elder of the Year
- □ Parents of the Year
- □ Dr. Walter Soboleff “Warrior of Light”
- □ Della Keats “Healing Hands”
- □ Lu Young Youth Leadership
- □ Public Service

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1. **Who are you Nominating?** (Please provide all contact information)

Name ___________________________ Phone: ___________________________

Address ___________________________ City: ______ State: ______ Zip: ______

Email ___________________________

Tribal Affiliation ___________________________

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2. **Information on family history, siblings, place of origin, etc.:**

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3. **Activities National/Statewide/Local:**
4. Please provide information on special talents, skills and past experiences relevant to the designated award category:

5. Please provide distinctive quotes, well-known guidance given, or any other information that is exclusive to the Nominee:

6. **Biography:** 250 words or less

7. Please attach a photo: