



# Pennsylvania State Mayors' Association 2020 Mayor of the Year Nomination Form

## Nominator/Mayor

|                               |               |
|-------------------------------|---------------|
| Nominator's Name:             | Mayor's Name: |
| Municipality:                 | County:       |
| Nominator's Telephone Number: | Email:        |

## Municipal Information

| Number of Years as Mayor:   | Size of Police Department: |
|---|----------------------------|
| Other Municipal Appointed/Elected Positions Held: (Fill in the Years and Title below) |                            |
| Dates   | Title/Position             |
|   |                            |
|   |                            |
|   |                            |
|   |                            |

| Current/Past Active Organizational Memberships: |                   |       |
|---|-------------------|-------|
| Dates   | Organization Name | Title |
|   |                   |       |
|   |                   |       |
|   |                   |       |
|   |                   |       |
|   |                   |       |
|   |                   |       |
|   |                   |       |
|   |                   |       |

## Awards

| Date | Award | Description |
|------|-------|-------------|
|      |       |             |
|      |       |             |
|      |       |             |
|      |       |             |

**Please include Mayoral accomplishments and accolades, attach extra pages as necessary**