



Pennsylvania State Mayors' Association Mayor of the Year Nomination Form

Nominator/Mayor

Date:

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

Major Accomplishments:

Please describe, attach extra pages as necessary