

FELLOWS NOMINATION & SELF-NOMINATION FORM

CANDIDATE INFORMATION

Full Name/Title _____

CONTACT INFORMATION

Firm/Organization _____ Phone () _____

Address _____ Cell () _____

Address Line 2 _____ Email _____

City _____ State _____ Zip _____

PLEASE STATE THE REASONS YOU BELIEVE THE NOMINEE WOULD AN ASSET TO THE FOUNDATION.

SELF-NOMINATION CANDIDATES, PLEASE STATE THE REASONS YOU WANT TO BECOME A FOUNDATION FELLOW.

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SELF-NOMINATION CANDIDATES, PLEASE PROVIDE TWO REFERENCES WHO KNOW ABOUT YOUR PROFESSIONALISM AND COMMUNITY SERVICE.

Reference 1 Name: _____

Reference 1 Phone and Email Address: _____

Reference 2 Name: _____

Reference 2 Phone and Email Address: _____

Nominator: By signing this form, you certify that, to your knowledge, the nominee is in good standing with the Supreme Court of Ohio, and any other state in which the nominee is admitted to practice; and has no current or pending disciplinary actions.

Self-Nominator: By signing this form, you certify that you are in good standing with the Supreme Court of Ohio, and any other state in which you have been admitted to practice, and have no current or pending disciplinary actions.

SIGNATURE _____ DATE _____

NOMINATOR NAME _____

NOMINATOR EMAIL _____ NOMINATOR PHONE NUMBER _____