AMERICAN LEADERSHIP FORUM
MOUNTAIN VALLEY CHAPTER

FELLOWS NOMINATION FORM

Please do not discuss this nomination with the nominee, as there is no guarantee that they will be selected.

Your Name: _____ **Phone:** _____

* = ***Required information***

***Nominee:** _____

***Position/Title:** _____

***Company/Org:** _____

Address: _____

City, State, ZIP: _____ ***County:** wk: _____ hm: _____

Work Phone: _____ **Work Fax:** _____

E-mail: _____ **Home Ph:** _____

***Diversity:** *(Check all that apply)*
❑ African-American ❑ Latino ❑ Caucasian ❑ Asian/Pacific Islander ❑ American Indian
❑ Middle Eastern ❑ Gay/Lesbian ❑ Other: _____

***Profession:** *(Check all that apply)*
❑ Agri-Business ❑ Arts ❑ Assn. ❑ Community ❑ Corporate ❑ Education
❑ Elected Official ❑ Faith ❑ Gov't. ❑ Health ❑ Labor ❑ Law Enf.
❑ Law/Professions ❑ Media ❑ Nonprofit ❑ Philanthropy ❑ Small Business
❑ Environment ❑ Other: _____

IMPORTANT!

The Fellows Nominating Committee will base its decisions on the information provided below.

***REQUIRED:** Please give a brief description (25 words or so – NOT a resume) of why you think this person should be a Fellow. Is this person a proven leader in the larger community or in some particular community or ethnic group? Is this person likely to remain in the region? Does this person "work and play well with others?" Use additional paper if needed.

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Please fax or email back to ALF-MV:

916-920-5675 or **mail@alf-mvc.org**