# TEXAS WOMEN'S HALL OF FAME 2020 NOMINATION FORM



# THE TEXAS GOVERNOR'S COMMISSION FOR WOMEN

#### Criteria for Selection

- Nominee must be a native or current resident of Texas
- Nominee may be deceased or living
- Former nominees are eligible and nominations may be resubmitted

#### **Statement of Qualifications**

- Please provide a narrative statement supporting your nomination of no more than two double-spaced, typed pages
  - Detail the nominee's background and accomplishments, and explain how the nominee has attained significant achievements in their particular discipline, field, or profession.
  - Explain how the nominee's achievements have benefited the State of Texas.
- Supporting data may be included but is not required. Examples include: a 5x7 photo, curriculum vitae, and/or a list of awards and honors received by the nominee. Any photo entries must be included on a Word or PDF document.

#### **General Information**

- Once submitted, the nomination form and all supporting documents become the property of the State of Texas.
- Winners are selected by a panel of judges. The judges do not discriminate on the basis of race, color, religion, age, or disability.
- Notification letters will be mailed to recipients and their respective nominators in June 2020.
- Please visit www.twu.edu/twhf for a list of current and past honorees.

#### **Submission Deadline**

- The deadline for submitting nominations is Thursday, April 30, 2020 at 12:00pm.
- Nominations may be submitted online, by mail, or hand delivered to the address listed below.
- Mailed nominations must be postmarked by April 30, 2020.
- Mailed and hand delivered nominations will be accepted at:

1100 San Jacinto Blvd Austin, Texas 78701

For questions or further information, please contact Christina McKinney at 512-475-2615 or women@gov.texas.gov



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## **GENERAL INFORMATION ABOUT THE INDIVIDUAL**

HALL OF FA

Name of Nominee:	
Email Address:	Phone:
Mailing Address:	
Employer (if applicable):	
Occupation (if applicable):	
Date of Birth:	Maiden Name:
	NOMINATION SUBMITTED BY
Name of Nominator:	
Email Address:	Phone:
Mailing Address:	
Signature:	
	COMMEND A

