

**MAINE MUNICIPAL ASSOCIATION  
Ethel N. Kelley Memorial Award**

**Nomination Form**

**\*\*\*\* Due Date – Friday, September 2, 2011 \*\*\*\***

(Please complete all applicable sections)

**Nominee's Name:** \_\_\_\_\_ **Municipality Served:** \_\_\_\_\_

**List Municipal Positions** (Please include information relating to service provided to your municipality as well to other municipalities):

Position(s): \_\_\_\_\_ Municipality: \_\_\_\_\_ Length of Service: \_\_\_\_\_

Position(s): \_\_\_\_\_ Municipality: \_\_\_\_\_ Length of Service: \_\_\_\_\_

Position(s): \_\_\_\_\_ Municipality: \_\_\_\_\_ Length of Service: \_\_\_\_\_

**Total length of local government service:** \_\_\_\_\_

**Membership in Professional Associations:**

\_\_\_\_\_  
\_\_\_\_\_

**Community Service and Recognitions Received:**

\_\_\_\_\_  
\_\_\_\_\_

**Is the Nominee Retired?**            \_\_\_ YES (When did Nominee Retire? \_\_\_\_\_ )  
   \_\_\_ NO (Anticipated Retirement Date? \_\_\_\_\_ )

**Signed by:**

Name: \_\_\_\_\_

Title: \_\_\_\_\_

Municipality: \_\_\_\_\_ Date: \_\_\_\_\_

Name: \_\_\_\_\_

Title: \_\_\_\_\_

Municipality: \_\_\_\_\_ Date: \_\_\_\_\_

Please complete and return with up to (5) supporting letters. ***The supporting letters are critical to your success.*** Care should be taken to describe in detail why your nominee should receive MMA's most prestigious award. Send letters, not to exceed five in number, by **Friday, September 2, 2011.**

**Ethel Kelley Memorial Award – Selection Panel  
Maine Municipal Association  
60 Community Drive  
Augusta, ME 04330**