



2010 Suzanne Carlisle Trainer's Scholarship Nomination Form

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NOMINEE	Name: _____
	Title: _____ Phone: _____
	Credit Union: _____
	Address: _____

NOMINATOR	Name: _____
	Title: _____ Phone: _____
	Credit Union: _____
	Address: _____

Please include all requested information and limit your nomination to two pages in total. You can submit your completed nomination as follows:

MAIL HRD Network - Administration Department
P.O. Box 910, Redwood City, CA 94064-0910

FAX (661) 833-7618

E-MAIL mark.manns@ksfcu.org

NOMINATIONS MUST BE RECEIVED NO LATER THAN JANUARY 27, 2010. WINNER WILL BE ANNOUNCED AT THE ANNUAL MEETING.

Please tell us why this person should receive this award:

