

**Distinguished Extension/Outreach Program Award**

Nomination Form

**Please select which category you wish to submit a nomination for.**

Less than Ten Years’ Experience

Ten or more Years’ Experience

Group

**Nominator’s Name \***

First Name:

Last Name:

**Nominator’s Affiliation:**

**Nominator’s E-mail:**

**Additional Nominator(s)- Name(s), and Email Address(es):**

**Nominee’s Name \***

First Name:

Last Name:

**Nominee’s Affiliation:**

**Nominee’s E-mail:**

**Additional Nominee(s)- Name(s), and Email Address(es):**

**Are you mailing hard copy award nomination materials? \***

Yes

No

* \*\*\* Please note that electronic award nomination materials are preferred. If you are mailing hard copy materials, please send them to:
* AAEA
* Attn:Anna
* 555 E. Wells Street, Suite 1100

Milwaukee, WI 53202

**Upload Award Nomination Materials**

Please save the file as the Nominee’s Last Name, First Name (ex: Smith, John)

**Please list any email addresses you would like a confirmation email sent to, stating Hattie Salzman has received your nomination. Hattie will email you as soon as possible.**