



## 2016 CRS Award for Excellence - Nomination Form

Please attach additional pages if more space is needed. Other materials in support of the nominee are welcome but not required. Submit this completed form and additional materials to address below.

- 1.** Name of CRS Award Nominee: \_\_\_\_\_  
Title of Nominee: \_\_\_\_\_  
Approximate Years of Service in this Role: \_\_\_\_\_  
Employer: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_  
ZIP: \_\_\_\_\_  
Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
Email Address (optional): \_\_\_\_\_

- 2.** Please describe any flood insurance marketing activities the nominee has performed.

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

- 3.** Describe any tangible results derived from these activities.

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

- 4.** Describe any flood mitigation or damage avoidance outreach the nominee has conducted.

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

- 5.** Describe collaboration with other local government, Federal and/or State Agencies that may have occurred.

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

- 6.** Identify the CRS communities involved. \_\_\_\_\_

- 7.** Include the names and titles of any local government community officials that were involved with these activities.

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

Submitted by (Name): \_\_\_\_\_ Company/Organization: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email Address: \_\_\_\_\_

Submit to: William Trakimas via email to [wtrakimas@iso.com](mailto:wtrakimas@iso.com)

For additional information call (202) 646 - 2807

**Deadline to receive nominations is July 31, 2016**