TURNER CARE	WOEA Wanda Adar Advocacy Award Nomination Form	ns Member
Nominee's Name		
Address		
City	Zip	
Phone	Email	
Local WOEA Example: Troy	A Association z E.A.	

LIST CRITERIA

• Leadership - Individual has served as an officer in their local, district and/state level (not necessarily a board member) and has been a change agent.

• Member Advocacy - Individual has served in a role that has impacted and supported any of the WOEA committees.

• Mentoring/Capacity Building - Individual has mentored other individuals who have moved forward to lead within the district association.

WOEA Wanda Adams Member Advocacy Award

Nomination Form

Nominator's Name	
Local Association Example: Troy E.A.	
Phone	
Email	