## 2021 NOMINATION FOR HONORABLE MENTION AWARDS - FORM 3

Local Chapter Name:	Area:	
Report submitted by:	Phone:	
Address:		
City/St/Zip:		
Email:		
Each local RTA may submit up to <b>thr</b> legal name(s). Briefly, describe the achours as equally important. Please che Chairperson to make sure your nomin also call the state office (888.454.933) newspaper clippings or pictures.	tivities of your nominee(s). Consider eck with your local president or your ees are members of Indiana Retired T	both Youth and Other volunteer Area Community Service Teachers Association. You may
1. Name	County:	
Address:	City:	Zip:
Volunteer Hours: Total:		
Volunteer Activities:		
2. Name:	County:	
	City:	
Volunteer Hours: Total:		
3. Name:	County:	
	City:	

Please send your nominations to your Area Community Service Chairperson by January 15.