GOLDEN TRIANGLE AWARD
NOMINATION FORM
DEADLINE: MARCH 1

(PLEASE TYPE OR PRINT CLEARLY)

Name of Nominee _____ Bethel # _____ Date of Birth _____

Email Address _____ Current Role with the Bethel _____

NOMINATOR INFORMATION / CONTACT PERSON

A person must be nominated by the Executive Bethel Guardian Council or someone from the Executive Grand Guardian Council. Please provide information on the contact person for the nomination.

Name _____ Current Exec BGC Position _____

Phone Number _____ Email Address _____ Bethel # _____

NAMES OF EXECUTIVE BETHEL GUARDIAN COUNCIL MEMBERS MAKING NOMINATION

(Or Executive Grand Guardian Council Member making nomination)

*Note: List all Executive Bethel Guardian Council Members (5) unless the Nominee represents one of the five. If so, the majority of the Executive Bethel Guardian Council should be listed below with their present title, affixing their signature after their printed or typewritten name.

NOMINATOR #1

NAME: _____ SIGNATURE: _____

PRESENT POSITION ON EX BGC OR GGC COUNCIL: _____

NOMINATOR #2

NAME: _____ SIGNATURE: _____

PRESENT POSITION ON EX BGC OR GGC COUNCIL: _____

NOMINATOR #3

NAME: _____ SIGNATURE: _____

PRESENT POSITION ON EX BGC OR GGC COUNCIL: _____

NOMINATOR #4

NAME: _____ SIGNATURE: _____

PRESENT POSITION ON EX BGC OR GGC COUNCIL: _____

NOMINATOR #5

NAME: _____ SIGNATURE: _____

PRESENT POSITION ON EX BGC OR GGC COUNCIL: _____