

## **Chuck Gossett Legislative Advocacy Award**

### **APPLICATION/NOMINATION FORM**

If nominating multiple candidates, please complete a separate form for each. Submit forms and all supplementals by emailing them to awards@oasbo-ohio.org by 4 p.m. on January 15.

### **Required Application Supplementals**

- Job Description
- Resume including employment history, professional affiliations, community affiliations, professional associations/activities, professional attainment and list of publications/presentations.
- Up to 2 letters of support from colleagues, board members, etc...

**Applicant/Nominee's Information** 

Applicanty Normitee 3 morniation					
First Name		Last Name			
School District					
Street Address					
City		State	Zip	Code	
Work Phone		Fax			
Email		•			

Nominated by

110111111111111111111111111111111111111					
First Name		Last Name			
School District					
Street Address					
City		State		Zip Code	
Work Phone		Fax			
Email					



# **Chuck Gossett Legislative Advocacy Award**

#### **Executive Summary**

exceeding 300 words.



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#### **Essay**

OASBO legislative program through participation on the legislative committee and in local legislative activities; maintains a working relationship with his/her own current legislators; encourages peers to be involved in advocacy and legislative issues by example and active promotion of the OASBO legislative program.

In the space provided, please share how the applicant/nominee has: Demonstrated a commitment to the