

## **Governor's Award for Excellence in Veteran Education Nomination Form**

Please read the **Nomination Guidelines** prior to completing this form. Please attach a written summary of the nominated institution's significant accomplishments in student veteran programs.

Nominee \_\_\_\_\_ Telephone \_\_\_\_\_

School Address \_\_\_\_\_

Nominator's Name \_\_\_\_\_

Address \_\_\_\_\_

Telephone \_\_\_\_\_

Signature of Nominator (required) \_\_\_\_\_ Date \_\_\_\_\_

I have read the nomination guidelines and attest that the above information is accurate and true. If the institution I am nominating is selected for the "Governor's Award for Excellence in Veteran Education" I agree to attend a public appearance with the Illinois Department of Veterans' Affairs.

\_\_\_\_\_ Date \_\_\_\_\_

Signature of Nominee (required) Date

**SEND COMPLETED FORM TO:**

Illinois Dept. of Veterans' Affairs  
Attn: Governor's Award for Excellence in Veteran Education  
100 West Randolph, Ste. 5-570  
Chicago, IL 60601-3219  
Fax (312) 814-2764