



2011 Nomination Information

Complete and return this form by **April 1, 2011** with no more than five typed (double-spaced) pages to:

Ohioana Library
274 East First Avenue, Suite 300
Columbus, Ohio 43201
(614) 466-3831
ohioana@ohioana.org

Nominee _____ County _____

Home Address _____ Phone _____

City, State, Zip _____ Fax _____

Business Address _____ Phone _____

City, State, Zip _____ Fax _____

Date of Birth _____ If Deceased, Date of Death _____

Number of Years of Ohio Residency _____

Nominator _____

Organization, If Applicable _____

Address _____ Phone _____

City, State, Zip _____ Fax _____

We, the undersigned, do hereby swear the information contained in this nomination is, to the best of our knowledge and understanding, accurate and truthful.

NOMINEE ONLY – If selected for induction into The Ohio Women’s Hall of Fame for 2011, I shall accept.

Signature of Nominee _____ Date _____

Signature of Nominator _____ Date _____

NO MORE THAN FIVE PAGES WILL BE REVIEWED FOR EACH NOMINATION