

# Kansas NAHRO Official Entry Form



## 2010 Awards Competition

*Please use a separate, fully completed entry form and  
Award Release(if applicable)for each entry.  
Submitting agencies must be current members of Kansas NAHRO*

	I	II	III	IV	V	VI	VII	VIII	IX
Category (Check One)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Name of Category: \_\_\_\_\_

### Agency Awards (Categories I, II, III)

Name of Agency \_\_\_\_\_  
 Agency Address \_\_\_\_\_  
 City, State, Zip code \_\_\_\_\_  
 Contact Person \_\_\_\_\_  
 Phone Number \_\_\_\_\_  
 Number of Units \_\_\_\_\_

Please securely attach the materials submitted, including information concerning cost and distribution of annual reports and other publications, frequency of newsletters, etc.

### Special Achievement or Media Recognition Awards (Categories IV and V)

Name of Employee, Tenant, Participant, Agency, Organization, Public Official, Law Enforcement Official, Individual, Broadcast Station or Newspaper, or magazine. Media nominated should be identified by name, the city in which it is published or from which it broadcasts, and with the name of the individual responsible for the coverage where possible.

Name of Person/Agency \_\_\_\_\_  
 Address \_\_\_\_\_  
 City, State, Zip code \_\_\_\_\_  
 Contact Person \_\_\_\_\_  
 Phone Number \_\_\_\_\_

Please attach or enclose descriptive information, clippings, tapes, etc., which support your nomination.

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### Commissioner Service Award (Categories VI)

Name of Commissioner \_\_\_\_\_  
Address \_\_\_\_\_  
City, State, Zip code \_\_\_\_\_  
Agency Served \_\_\_\_\_  
Contact Person \_\_\_\_\_  
Phone Number \_\_\_\_\_

Please attach or enclose simple, narrative descriptive information, which supports your nomination.

### Extra Mile Award (Categories VII)

Name of Nominee \_\_\_\_\_  
Address \_\_\_\_\_  
City, State, Zip code \_\_\_\_\_  
Agency \_\_\_\_\_  
Contact Person \_\_\_\_\_  
Phone Number \_\_\_\_\_

Please attach or enclose simple, narrative description, which supports your nomination.

### The "Horse's Aft" Traveling Trophy (Categories VIII)

Name of Nominee \_\_\_\_\_  
Address \_\_\_\_\_  
City, State, Zip code \_\_\_\_\_  
Agency \_\_\_\_\_  
Contact Person \_\_\_\_\_  
Phone Number \_\_\_\_\_

Please attach or enclose simple, narrative description and/or other information, which supports your nomination.

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### Nadine Burch "Member of the Year" Award (Categories IX)

Name of Nominee \_\_\_\_\_  
Address \_\_\_\_\_  
City, State, Zip code \_\_\_\_\_  
Agency \_\_\_\_\_  
Contact Person \_\_\_\_\_  
Phone Number \_\_\_\_\_

Please attach or enclose simple, narrative description, which supports your nomination.

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Name of Person  
Preparing the Entry: \_\_\_\_\_  
Address \_\_\_\_\_  
City, State, Zip code \_\_\_\_\_  
Agency \_\_\_\_\_  
Phone Number \_\_\_\_\_

Submissions must be received by the VP Member Services on or before Friday, April 2, 2010.

Gail Lotson, VP Member Services  
C/O Wichita Housing Authority  
332 N. Riverview  
Wichita, Kansas 67203  
Ph: 316-462-3792 Fax: 316-337-9103  
[glotson@wichita.gov](mailto:glotson@wichita.gov)