



LAUREATE NOMINATION FORM

Nominator Information

First Name*

Last Name*

Email*

Phone

Street Address*

Street Address Line 2

City*

State*

Postal / Zip Code*

Nominee Information

First Name*

Last Name*

Email*

Phone

Street Address*

Street Address Line 2

City*

State*

Postal / Zip Code*



Nominee Submission Details

Number of years of service to the
Loudoun County Community:

List of groups and organizations served by the nominee and the
capacity in which the nominee served the organization or group:

Description of volunteer service:



Nominee Submission Details

Description of vocational service:

Description of the manner in which the nominee
has served the broader Loudoun County community:

Please submit the completed form and a minimum of one letter of
recommendation for the nominee to **info@loudounlaurels.org**