



## La Voz Latina Annual Recognition Awards 2019 Nomination Form

YWCA La Voz Latina is seeking nominations of Hispanic/Latino community members who are deserving of recognition for their involvement and service to the community and/or serve as role models for youth in the Northwestern Illinois community.

YWCA La Voz Latina judging committee volunteers will review the nominations and select the most outstanding nominees to receive the “Latino of Distinction” and the “Community Member of Distinction” awards. Recipients will be named at the annual banquet. This year’s banquet will be held on August 23, 2019.

**Deadline for submittal will be: Friday, July 19, 2019.**

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*Please check the appropriate category. The Selection Committee reserves the right to reclassify nominees to other categories:*

\_\_\_\_\_ **Latino of Distinction**

*The nominees should have earned a college degree, certification in a skilled trade, or other post-secondary accreditation. Ideal candidates should be recognized as role models for youth, have distinguished themselves in their chosen career, and have demonstrated a commitment to civic involvement. The purpose of the award is to highlight outstanding leaders from various walks of life, such as business, health care, education, engineering, the professions, faith-based institutions, government, and more.*

\_\_\_\_\_ **Community Member of Distinction**

*The nominees shall have demonstrated a sustained commitment to the Latino community and distinguished themselves as role models and leaders who inspire other members of the community to contribute and be more involved within the community. The purpose of the award is to highlight outstanding community members who demonstrate passion and devotion for the advancement of the Hispanic community in the Rock River Valley Region.*

Nominations must be **received by mail, email, or in person by 5:00 pm, July 19, 2019.**

La Voz Latina  
YWCA Northwestern Illinois  
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# La Voz Latina Annual Recognition Awards 2019 Nomination Form

## Nominee

Name: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ Zip Code: \_\_\_\_\_

E-Mail: \_\_\_\_\_

Organization/Company: \_\_\_\_\_ Title (if appropriate): \_\_\_\_\_

### **Reason for Nomination (e.g., positive role model traits):**

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### **Community Service and Accomplishments:**

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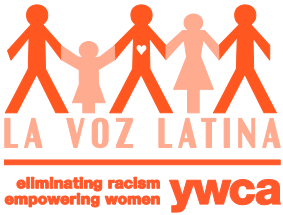
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(use additional sheet if needed)



# La Voz Latina Annual Recognition Awards 2019 Nomination Form

## Nominator

Submitted by (Company, Organization, or Individual): \_\_\_\_\_

Contact Person: \_\_\_\_\_ Phone: \_\_\_\_\_

Address, City: \_\_\_\_\_ Zip Code: \_\_\_\_\_

E-Mail: \_\_\_\_\_ Date: \_\_\_\_\_

*\$65 must be paid via check or credit card to cover the cost of dinner attendance for your nominee*

Select one of the following:

- Payment Enclosed                       Please Invoice for Payment

Yes, I/we would like to make a reservation to attend the banquet and accompany the nominee. Select one of the following and include payment with form.

**Individual reservations (\$65 per person)**

Please list name(s) of attendee(s):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Vegetarian:

**Corporate Table for 8 with logo identifying table (\$800)**

Please list names of attendees:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Vegetarian:



## La Voz Latina Annual Recognition Awards 2019 Nomination Form

Please seat my nominee/guest with (optional): \_\_\_\_\_

### Banquet Reservations

Nominee cost \$65		\$ 65
Individual seating \$65	x _____ =	\$ _____
Individual (YWCA Member) \$60	x _____ =	\$ _____
Corporate table \$800	x _____ =	\$ _____
Total		\$ _____

**Banquet reservations can be made via check or charge. For charges, please complete the following:**

Your name: \_\_\_\_\_

Your address: \_\_\_\_\_

City, State, & Zip: \_\_\_\_\_

Your email: \_\_\_\_\_

Daytime phone: \_\_\_\_\_

Method of payment:  Check  Visa  MasterCard

Credit card #: \_\_\_\_\_

Expiration date: \_\_\_\_\_ CVV (3 digit # on back): \_\_\_\_\_

Billing ZIP code: \_\_\_\_\_

Do you require a copy of your charge receipt:  Yes  No