Women’s Leadership Group
Woman of Distinction Nomination

(WOD Nominations are only accepted during active nomination period)

Your Information:
Name: ___________________________________________________________
Phone: ___________________________  Email: _______________________

_________________________________________________________________

Woman of Distinction Nominee Information:
Name: ___________________________________________________________
Phone: ___________________________  Email: _______________________
Position: __________________________  Employee Group: ____________ (if known)

Nomination Criteria:

Leadership – How does she demonstrate leadership at any level of the organization?
_________________________________________________________________
_________________________________________________________________
What initiatives has she progressed for the good of the students, college or district?
_________________________________________________________________
_________________________________________________________________

Innovation – How has she developed ‘out of the box’ solutions to college issues?
_________________________________________________________________
_________________________________________________________________

Service – How does she go ‘above and beyond’ her immediate job responsibilities?
_________________________________________________________________
_________________________________________________________________

Contribution to Women – How does she contribute to the professional lives of Maricopa women?
_________________________________________________________________
_________________________________________________________________

Attach additional pages if needed.