Governor's Archives Award 2022
Nomination Cover Sheet

Award Category (check one):
Archival Achievement Award __
Archival Innovation Award __
Archival Advocacy Award __

Name and Address of Individual or Organization being Nominated:
Name: ____________________________
Street: ____________________________
City: ____________________________ State: __________ Zip: __________

Name and Address of Contact Person (If Nominee is an Institution or Organization):
Name: ____________________________
Street: ____________________________
City: ____________________________ State: __________ Zip: __________

Name and Contact Information of Nominator:
Name: ____________________________
Street: ____________________________
City: ____________________________ State: __________ Zip: __________
Phone: ____________________________
E-mail Address: ____________________________