

Wisconsin Historical Society Museum Exhibit Award
Nomination Form



Name of Institution/Organization:

Street Address:

City, State, Zip:

Exhibition budget total \$

Contact Person:

Title:

Telephone:

Email:

Exhibition Title:

Exhibition Summary (brief description of exhibit topic):

Type of Exhibition: Permanent Temporary Traveling

Opening and Closing Dates (mm/dd/yyyy-mm/dd/yyyy):

Please describe special events/programs/educational materials produced for exhibit:

Please attach a narrative (not to exceed three single-spaced pages) that describes the exhibition and specifically addresses the criteria; the exhibition script including label text; the exhibition budget; artifact list; exhibition floor plan and a selection of at least 10 captioned images, either as color slides or jpeg files on a flash drive.

Mail completed nomination:

Mike Hollander

Wisconsin Historical Museum

30 N. Carroll St.

Madison, WI 53703