



NATIONAL ASSOCIATION OF SOCIAL WORKERS,  
MISSISSIPPI CHAPTER  
P.O. BOX 5599  
PEARL, MS 39288-5599  
NOMINATION FORM  
**NASW, MS CHAPTER-SCHOOL OF SOCIAL WORK AWARD**  
*PLEASE TYPE.*

NAME OF STUDENT NOMINEE: \_\_\_\_\_

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

Email address \_\_\_\_\_

Phone: \_\_\_\_\_

NAME AND POSITION OF NOMINATOR: \_\_\_\_\_

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

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

Phone: \_\_\_\_\_

SCHOOL OR UNIVERSITY: \_\_\_\_\_

ACADEMIC CLASSIFICATION: PLEASE CIRCLE:

BSW: JUNIOR or SENIOR

MSW: 1<sup>st</sup> Year 2<sup>nd</sup> Year or 3<sup>rd</sup> Year

Is student a current member of NASW?

Yes \_\_\_ Membership number \_\_\_\_\_

No \_\_\_ (membership is required for nomination)

Program Chair/Director or Dean:

\_\_\_\_\_  
Signature

ATTACHMENTS:

1: Faculty Nomination: An attachment *must* be completed by the faculty member summarizing the student's accomplishments earning them the recognition of this award. The summary should include but does not have to limit itself to the following information:

ACADEMIC/PERSONAL ACHIEVEMENTS (including awards received)

VOLUNTEER EXPERIENCES

ADVOCACY INVOLVEMENT

2: TWO LETTERS OF RECOMMENDATION, ONE FROM A FACULTY MEMBER AND ONE FROM THE FIELD PLACEMENT OR VOLUNTEER SUPERVISOR.

Please complete and send to the NASW office by February 18, 2022.

Awards Committee

Email: [conference..naswms@socialworkers.org](mailto:conference..naswms@socialworkers.org)

NOTE: ALL INFORMATION WILL BE HELD AS CONFIDENTIAL.

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OFFICE USE ONLY

DATE REVIEWED: \_\_\_\_\_ STATUS: \_\_\_\_\_

COMMENTS: \_\_\_\_\_