



Fellow Endorsement Form

Each nomination packet must include three endorsement forms completed by three different individuals.

Please note: information may be provided separately if more space is required

Endorser Contact Information:

Endorser's name: _____

Address: _____

City: _____ State: _____ Zip code: _____

Phone: (home, work or mobile) _____ E-mail: _____

Criterion #1 - Commitment to SAF

- 1) Provide specific examples that demonstrate the nominee's commitment to SAF voluntary activities in two (2) or more of the following SAF organizational levels: local (chapter); state; regional (multi-state or voting district); or national. Examples should include as much detail as possible to demonstrate the nominee's involvement in each activity or project.

- 2) Provide information on how SAF benefited from the nominee's involvement in these activities or projects. Please be as specific as possible and include any and all short-term and long-term impacts to SAF.

