



NORTH AMERICAN CONSUMER PROTECTION INVESTIGATORS
RECOGNITION PROGRAM NOMINATION FORM

Individual or Organization completing form:

Name: _____

Title: _____

Agency Affiliation: _____

Address: _____

Phone Number: _____

Email address: _____

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Nominee Information:

Name: _____

Title: _____

Agency Affiliation: _____

Address: _____

Phone Number: _____

Email Address: _____

*Please provide the information above for all members of the team being nominated. A separate sheet of paper can be used for this information.

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Categories (please check one):

- ☐ Excellence in Leadership
- ☐ Innovation
- ☐ Outstanding Consumer Protection
- ☐ Support to NACPI
- ☐ Partnership(s)

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Dates of Achievement or Accomplishment (must be within past three years):

Please use the space below or attach a letter of reference to provide a brief description of the achievement or accomplishment for which you are nominating this individual, agency or team. This description should indicate what makes the achievement outstanding in support of the nominee(s) in question. It should validate the achievement and add credibility to the nomination. A specific list of questions based on each of the five categories is listed in the NACPI Recognition Program Nomination Guide.

This image shows a blank sheet of white paper with horizontal ruling lines. The lines are evenly spaced and extend across the width of the page. There are no margins, text, or other markings on the paper.

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