



# 2017 Oregon Rose Award Nomination Form

Name of Nominee \_\_\_\_\_

Address of Nominee \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone Number(s) \_\_\_\_\_

Name of person(s) making nomination: \_\_\_\_\_

\_\_\_\_\_

Reason for nomination: \_\_\_\_\_

Tell us your special story about how this adult has served your Bethel or Oregon Job's Daughters. Attach additional pages as needed. Several people may want to write about this person,

Please return form to: Carolyn Wilson, Grand Guardian  
2187 NW 12<sup>th</sup> St, Gresham, OR 97030  
redshoewonder@yahoo.com  
Nominations are due by June 1, 2017