

**KANSAS GOVERNOR'S AVIATION HONOR AWARD
AND KANSAS AVIATION HALL OF FAME**

NOMINATION FORM

PLEASE PRINT OR TYPE ALL INFORMATION BELOW:

The name of _____, who

Resides at _____, is hereby

Respectfully submitted to the 20__ (year) award of: (select one)

_____ Kansas Governor's Aviation Honor Award

_____ Kansas Aviation Hall of Fame

The city/town/county in which his/her most significant work was accomplished with respect to

this award is _____.

Please provide year of birth _____. If deceased, please provide year of death _____.

This nomination is submitted by:

(Individual or organization submitting name)

(Address and telephone number of nominator)

Instructions: The record of the candidate's achievements must be typewritten on one side, double spaced, three (3) pages or less, and submitted in triplicate. Send nominations, to be Received by August 1 of each year.

Achievements: (Use separate pages)

Signature _____ Date _____