

## ACTIVITY DIRECTOR OF THE YEAR

Your Name: \_\_\_\_\_

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

Organization/Chapter: \_\_\_\_\_

E-Mail/Phone # \_\_\_\_\_

### CRITERIA FOR NOMINATION

1. **Must be a current WSAAP member in good standing.**
2. Nominated by a WSAAP Chapter, Facility/Administrator or another Activity Professional.
3. Number of years of experience.
4. Outstanding achievements.
5. Community involvement (past & present).
6. Support of WSAAP and Local Chapter.
7. Any other letters of support.
8. What makes this person a good Activity Director?

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

Organization/Chapter: \_\_\_\_\_

Statement: (or attach letter)

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### NOMINATION DEADLINE

July 30, 2010

#### PLEASE RETURN TO:

Linda Flater

Ridgemont Terrace

2051 Pottery Ave.

Port Orchard, WA 98366

Or Fax to: 360-876-6170