2012 CRS Award for Excellence
Nomination Form

Please attach additional pages if more space is needed. Other materials in support of the nominee are welcome but not required. Four copies of any extra pages or materials should be submitted with this form to the address below.

1. Name of CRS Award Nominee: ________________________________
   Title: ______________________________________________________
   Approximate Years of Service in this Role: _______________________
   Address: ____________________________________________________
   City: __________________________ State: ______ ZIP: _____________
   Phone: ________________________ Fax: _________________________
   Email Address (optional): _____________________________________
   Person who will accept award (including title): ____________________

2. Please describe the flood insurance marketing activities the nominee has performed.
   ___________________________________________________________________
   ___________________________________________________________________
   ___________________________________________________________________

3. Describe any tangible results derived from these activities. _______________________
   ___________________________________________________________________
   ___________________________________________________________________
   ___________________________________________________________________

4. Describe any flood mitigation or damage avoidance outreach the nominee has conducted.
   ___________________________________________________________________
   ___________________________________________________________________
   ___________________________________________________________________

5. Describe collaboration with other local government, Federal and/or State Agencies that may have occurred.
   ___________________________________________________________________
   ___________________________________________________________________
   ___________________________________________________________________

6. Identify the CRS communities involved. ________________________________

7. Include the names and titles of any local government community officials that were involved with these activities.
   ___________________________________________________________________
   ___________________________________________________________________
   ___________________________________________________________________

Submitted by (Name): __________________ Company/Organization: ________________
Address: _______________________________________________________________
City: __________________________ State: ______ ZIP: _____________
Phone: ________________________ Fax: _________________________
Email Address (optional): _______________________________________________

Submit to:
CRS Coordinator, Room 968, Federal Insurance and Mitigation Administration, FEMA
1800 South Bell Street, Arlington, VA 20598-3030
Or by FAX to (202) 646-3074 or email to bill.lesser@dhs.gov.
For additional information call (202) 646 - 2807

Deadline to receive nominations is February 24, 2012.