



Your health deserves a partner.

**2024 ATHENA
AWARD
NOMINATION
FORM**

NOMINEE: Name: _____

Title or Position/Company: _____

Business Address: _____

Work Phone: _____ Cell: _____

Email: _____

NOMINATOR: Name: _____

Company/Organization: _____

Phone: _____ Email: _____

NOMINEE PLEASE ANSWER COMPLETELY THE FOLLOWING QUESTIONS:

I. PROFESSIONAL LEADERSHIP

Provide specific examples of how the nominee has demonstrated excellence, creativity and initiative in their business or profession.

II. COMMUNITY LEADERSHIP:

Provide specific examples of how the nominee provides valuable service to improve the quality of life for others in their community. Include type and length of service in civic and service organizations and initiatives.

III. PERSONAL LEADERSHIP/ MENTORSHIP:

Provide specific examples of how the nominee has actively assisted women in achieving their full leadership potential, and/or demonstrated support for their personal and professional advancement.

IV. ADDITIONAL INFORMATION PERTAINING TO CRITERIA:

Include any additional information you feel is important for consideration of your nominee. Include awards, honors, publications, articles and/or testimonials that demonstrate service to their profession, community, and, most importantly, aspiring and established women leaders.

Return completed application by Friday, April 26, 2024

**Greater Hazleton Chamber of Commerce
Citiscapc, 8 West Broad Street—Suite M 1490
Hazleton PA 18201
P: (570) 455-1509**