

**Linn-Benton Community College  
Distinguished Alumni Award  
Nomination**

**Nominee's Information**

Name \_\_\_\_\_

Academic Major \_\_\_\_\_

Address \_\_\_\_\_

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

E-mail Address \_\_\_\_\_

Home Telephone Number \_\_\_\_\_

Business Telephone Number \_\_\_\_\_

**Education Information**

LBCC Years of Attendance \_\_\_\_\_ Degree \_\_\_\_\_

Bachelor's Degree \_\_\_\_\_ Field of Study \_\_\_\_\_

Graduate Degree \_\_\_\_\_ Field of Study \_\_\_\_\_

Doctoral Degree \_\_\_\_\_ Field of Study \_\_\_\_\_

**Professional Achievements**

Please attach a copy of the nominee's most current employment history resume or vitae.

Please list and describe all honors and/or awards received by the nominee related to his or her employment history or career.

**Professional Achievements (continued)**

**Volunteer Achievements**

Please describe all volunteer service performed by the nominee since his or her graduation from Linn-Benton Community College. In addition, please include all awards/recognition received by the nominee in regards to his or her volunteerism and service.

Please describe why you feel the nominee should receive this award. (500 words maximum)

**(continued)**\_\_\_\_\_

**Nominator's Information**

Nominator's Name\_\_\_\_\_

Relationship to Nominee\_\_\_\_\_

Address\_\_\_\_\_

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

E-mail Address\_\_\_\_\_

Home Telephone Number\_\_\_\_\_

Business Telephone Number\_\_\_\_\_

Please submit the nomination form and supporting documents to:

Dale Stowell  
Executive Director, Institutional Advancement  
Linn-Benton Community College  
6500 Pacific Boulevard SW  
Albany, OR. 97321