



New York State Association of REALTORS®, Inc.

**NOMINATION FORM**  
**2021 COMMUNITY SERVICE AWARD**

Date: \_\_\_\_\_

**Individual Reporting:**

Name of Individual Reporting: \_\_\_\_\_

Email of Individual Reporting: \_\_\_\_\_

**Nominee Information:**

Name: \_\_\_\_\_ Firm Name: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip code: \_\_\_\_\_

Phone number: \_\_\_\_\_ E-mail: \_\_\_\_\_

Primary Association: \_\_\_\_\_

Designations: \_\_\_\_\_

The approximate date of when the nominee became a member of NYSAR: \_\_\_\_\_  
*(If the local board is unable to determine this, NYSAR Staff may be able to assist with this information)*

Is the nominee deceased?\* \_\_\_\_\_ Yes \_\_\_\_\_ No

\*If Yes, please provide year of death \_\_\_\_\_

\*If Yes, please provide contact information of nearest family member:

\_\_\_\_\_

Have you notified the nominee of this nomination? \_\_\_\_\_ Yes \_\_\_\_\_ No

Please describe how the nominee has helped enhance the community in which he/she lives or works:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Please describe any extraordinary demonstrations of leadership and/or contributions the nominee has made to improve the community or lives of individuals or the quality of life in his or her community:

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Please describe the leadership positions the nominee has held in the community:

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Please list the firms in which the nominee has held a license (firms and approximate years of service):

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Please provide a point of contact to coordinate with interested parties who may wish to attend General Assembly session for the announcement.

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Please **INCLUDE** an **Electronic-jpeg 5 x 7-Color photo**

Fax completed form to (518) 462-5474; email at [cmurray@nysar.com](mailto:cmurray@nysar.com) or mail form to:

Charity Murray, Board and Member Services Assistant  
New York State Association of REALTORS®, Inc.  
130 Washington Avenue  
Albany, New York 12210-2298

Deadline for reporting is **Friday, June 25, 2021**