## NOMINATION FORM FOR 2019 INDIVIDUAL AND/OR ORGANIZATION AWARD FOR HISTORY (to be completed by the nominator)

Nominee:			
Telephone: (work)	(home)	(cell)	
E-Mail			
Address:			
City/State/Zip Code:			
Group Contact Person:			
Telephone: (work)	(home)		
Address:			
City/State/Zip Code:			
Why are you nominating this	individual/organi	zation?	
Please address nominee's sp history. You are encouraged possible, on a separate pag of work such as a publicati	to provide as muc e if necessary. Al	n biographical informati so, include descriptive	on as
Nomination submitted by:			
Relation to Nominee:			
Address:			
City/State/Zip Code:			
Telephone:(work)			
E-Mail	_		
Nominator's signature:		Date:	

Please return by February 25, 2019, to: South Dakota State Historical Society, Governor's Awards for History, 900 Governors Drive, Pierre, SD 57501-2217. If you have any questions, please call Jeff Mammenga, Awards Coordinator, at (605) 773-6000.