TEXAS ASSOCIATION OF LEGAL PROFESSIONALS LEGAL PROFESSIONAL OF THE YEAR NOMINATION FORM

Name:				
Phone:		ocal Chapter:		
Date submitted:	D	Date received by Chair:		
		= = =		
I. ED		AND CERTIFICATION		
High school:				
Graduation date:				
Business/secretarial school, junior college, college, or university:				
Graduation date(s):		Degree(s) obtained:		
Are you a Certified PP? Yes	No	Date certified:		
Are you a Certified PLS/LP? Yes	No	Date certified:		
Are you a Certified ALP? Yes	No	Date certified:		
Do you have a specialty certification designation? If so, what is the certification?				
Yes No Date of o	certification	n:		
Have you completed a legal profest business/secretarial school, college		se sponsored by a professional association, sity? Yes No		
If so, provide the name of the course, sponsor, and date of completion:				

Have you received any other certification? If so, what is the certification?

Yes _____ No _____ Date of certification: ______

II. LEGAL SKILLS AND EXPERIENCE				
Name of Employer	Position Held	Dates of Employment		

= = = II. LEGAL SKILLS AND EXPERIENCE

Total years of experience: _____

= = =

III. SPECIAL HONORS EARNED

Honor(s) received, including date(s):

Effective _____

= = =

IV. SERVICE TO STATE AND LOCAL ASSOCIATIONS

Date of affiliation as member: _____

Name and location of local chapter: _____

Association	Elected Offices	Appointed Offices/Committee Chairmanships
LOCAL		
STATE		

= = =

V. OPTIONAL INFORMATION

Membership in other organizations (including dates of active participation and offices held). You may include your service to NALS in this section.

Effective _____

= = =

VI. NOMINEE NARRATIVE

In the space provided below, please describe, <u>in 300 words or fewer</u>, your job description, including the duties you like best and the duties you like least. If you need additional space, please continue your narrative on the reverse of this sheet with the heading, "Nominee Narrative, Continued."

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VII. COMMENTS BY YOUR PRESENT EMPLOYER

<u>This section must not exceed 300 words</u>. If you require additional space, please continue your comments on the reverse of this sheet with the heading, "Comments by Your Present Employer, Continued."

VIII. COMMENTS BY LOCAL CHAPTER OR NOMINATING MEMBER

<u>This section must not exceed 300 words.</u> If you need additional space, please continue your comments on the reverse of this sheet with the heading, "Comments by Local Chapter or Nominating Member, Continued."

NOMINEE:

Nominee's signature

Printed name of nominee

IF NOMINATED BY MEMBER:

Nominating member's signature

Printed name of nominating member

Local chapter of nominating member

Address of nominating member

E-mail of nominating member

Local chapter name

Local chapter officer's signature

Printed name of local chapter officer

IF NOMINATED BY LOCAL CHAPTER:

Address of local chapter officer

E-mail of nominating chapter officer

Effective _____

FINAL INSTRUCTIONS

Before submitting this nomination form, please check it carefully to ascertain that it conforms to the TALP Official Rules and Regulations. Nomination forms which do not conform to the Official Rules and Regulations will be disqualified.

Nominations must be submitted by the local chapter or nominating member on the TALP nomination form. Please submit an original and one copy.

Nominations must be hand delivered to the Awards Chair no later than February 28 <u>or</u> postmarked by the United States Postal Service on or before February 28 <u>or</u> validated by an overnight delivery service that such parcel was placed in a depository of the overnight delivery service on or before February 28. These are your <u>only</u> delivery options. The nomination forms must be received by the Awards Chair on or before March 7.

The nominating local chapter or nominating member should send an e-mail to the Awards Chair stating that the TALP Nomination form has been sent in accordance with the guidelines and rules. Once the Awards Chair has received the TALP Nomination Form, the Awards Chair will confirm receipt via e-mail to the nominating local chapter or the nominating member.

No testimonial or other supporting documents will be considered.

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DEADLINE FOR SUBMISSION: Monday, February 28, 2022

Return completed form to:

Laura DeLeon 3501 West Waco Drive Waco, Texas 76710

Additional information on Laura: Phone number: 254-752-9688 E-mail address: Ideleon@zlawhelp.com