

SAI NATIONAL OUTSTANDING COLLEGIATE TREASURER AWARD

(Nominations may be made by chapters or by Province Officer)

DATE _____ REGION _____ PROVINCE _____

CHAPTER OF NOMINEE _____

This form is to be completed by the chapter and sent to the Province Officer by **May 15th**.
Be certain to give as much detailed information as possible on points of selection. The Province Officer will select only one candidate among those nominated and forward her nomination to National Headquarters. **Forms must be postmarked by May 15th, to be considered by the Province Officer.**

NOMINEE _____

PERMANENT ADDRESS _____

_____ ZIP _____

I. ANNUAL TREASURER'S REPORT

(Include information on completeness, accuracy, legibility, and timeliness.)

II. ATTENTION TO, AND PAYMENT OF, NATIONAL AND LOCAL BILLS

III. COMMUNICATION

A. With chapter

B. With Province Officer/National Officers

IV. LEADERSHIP

A. In Chapter Financial Operations

B. In Promoting National Fraternity Projects

V. OTHER REASONS FOR SELECTION OF CANDIDATE (attach separate sheet, if needed)

Signature of Nominating Chapter Officer
(if applicable)

Office Held

To be completed by the Province Officer – Please provide a brief statement of your reasons for endorsing this candidate. Attach additional sheet, if needed.

Signature of Province Officer

PO, PLEASE FORWARD BY JUNE 15th: One copy of this form to National Headquarters

PO NOMINATIONS POSTMARKED AFTER JUNE 15th WILL NOT BE CONSIDERED