

MUTUAL ASSISTANCE ASSOCIATION FOR THE ETHIOPIAN COMMUNITY

AWARD FOR EXCELLENCE

APPLICATION FORM

1. Date:

2. Person/Entity submitting the nomination:

Name:  
Address: Street: Res. No.  
City: Zip:  
Telephone: Res: Office: cell:

3. Nominee:

Name:  
Address: Street Res. No.  
City: Zip:  
Telephone: Res: Office: cell:

4. Award Category: (please choose as appropriate):

- Extra-ordinary achievement for the benefit of the Ethiopian community in DFW (Art. 4.1 of the regulations);
- Extra-ordinary achievement of benefit for USA and/or Ethiopia (Art. 4.2 of the regulations);
- Excellence in education, research, and other economic and socio-cultural endeavors (Art. 4.3 of the regulations);
- Extra-ordinary long service and participation in community works and other Categories considered appropriate by the MAAEC Board of Directors (Art. 4.4 of the regulations).

5. Justification (Provide a detailed explanation as to how the nominee fulfills the Award's criteria: Art. 3 of the regulations; use an attachment if necessary)

Extra-ordinary nature of the achievement:

High benefit (please choose as appropriate and provide an explanation):

To an individual: Name;

To the community;

To USA;

To Ethiopia;

To humanity at large.

Explanation:

6. Assessment and Recommendation by the MAAEC Review and Selection Team

Chairman's Name:

Signature:

Date:

7. MAAEC Board's Decision

Chairman's Name:

Signature:

Date:

