



Ohio Association of Career Colleges and Schools
Legislative Nomination Form
Application Deadline: April 2, 2012



Instructions:

1. Complete **ONLY** the **top section** of this form and send it to your **OHIO** Representative or **OHIO** Senator requesting that they nominate you for the specific scholarship. (A separate form is needed for **each** additional scholarship for which you apply.)
2. Request a member of the **OHIO** Legislature to return the nomination form to your high school counselor for inclusion as part of your Application.

Name: _____ Phone: (____) _____

Street Address: _____

City/State/Zip Code: _____

School Name: _____

School Counselor's Name: _____

School Address: _____

City: _____ State: ____ Zip: _____

I am applying for a career scholarship in _____
 _____ (Name of Program)

_____ from _____
 (Scholarship Number) (Name of College/School and City)

Nomination: (To be completed by a member of the Ohio Legislature.)

I hereby nominate _____
 to be considered by the Scholarship Committee for the above mentioned Scholarship.

Signature

State Senator, District Number

State Representative, District Number

Nomination Form should be returned to high school counselor