

***Federal Court Clerks Association
Ross Levy Memorial Awards Program***

Name of Nominee: _____

Location: _____

Nominee's Qualifications (attach additional sheets if necessary):

(1) How long has the nominee been a member of FCCA?

(2) How has the nominee assisted the FCCA in fulfilling its mission?

(3) Which FCCA programs/activities has the nominee contributed considerable time and energy to?

(4) Other comments:

Submitted by: _____

Location & Telephone Number: _____

Date: _____

Certification:

approved _____

disapproved _____

Comments:

Signatures and dates:

Chair, Deputy Clerks' Council

(1) Committee Member

(2) Committee Member

Ms. Corrine Szalay
Ross Levy Memorial Award Committee Chair
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