Nomination Form for Hometown Hero Program - 2016

Please return to Office of the First Selectman, P.O. Box 495, Simsbury, CT 06070 - no later than 5:00 p.m. on April 18, 2016

Criteria for Selection

- (Adopted by the Board of Selectmen, November 13, 1996; Amended February 23, 1998)
- A. A person(s) who is a resident, or who is active in the Simsbury community, or who lived in Simsbury during the time period that is under consideration;
- B. Person(s) who has/have demonstrated selfless and altruistic behavior which contributes significantly to the betterment of our Town;
- C. That such deed or action performed inures primarily to the Town of Simsbury, although not necessarily exclusively; and that
- D. Any individual or group that has been nominated to the Hometown Hero Award Committee (henceforth 'Committee') shall be duly considered with the following exceptions: The Hero shall not be a member of Town staff, nor a sitting elected official. Nor shall the Hero have benefited economically from his/her endeavors on behalf of the Town.

Name of Nominee:		
Nominee's Address:		
Nominee's Phone Number	:	
Simsbury and attach to thi		
Check one of the following	ng regarding the Nominee's status durin	g time period under consideration:
☐ Simsbury Resident	☐ Active in Simsbury Community	☐ Lived in Simsbury at time
Name and Phone Number	of Person completing form (optional)	
		

www.simsbury-ct.gov

A n Equal Opportunity Employer

8:30 - 7:00 Mondays

8:30 - 1:00 Friday

8:30 - 4:30 Tuesday through Thursday

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