

**SOUTHEASTERN LIONS LEADERSHIP INSTITUTE**

**NOMINATION FORM**

**Deadline: April 1, 2010**

Please print or type.

**Candidate:**

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Last Name	First Name	Middle Initial	Nickname
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Address	City	State	Zip Code
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How long have you known the candidate?

In what capacity have you known the candidate?

Why do you feel this candidate has potential as a Lion leader?

How could this candidate benefit from a Lion=s Leadership Institute?

**Nominator:**

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Last Name	First Name	Middle Initial	Nickname
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Address	City	State	Zip
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Residence Phone	Business Phone	Fax Number
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E-Mail address	Club Name	District Number
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Signature \_\_\_\_\_

Lion Title \_\_\_\_\_

**Mail to:** Lion Dr. Beverly A. Roberts  
Institute Coordinator  
4748 Fulcher Road  
Hephzibah, GA 30815