



CITY OF LAUREL, MARYLAND

Student of the Month Nomination Form

Date: _____

Name of Nominee: _____

Address: _____

City: _____ State: _____ Zip: _____

School: _____ Grade: _____

Daytime Phone: _____ Evening Phone: _____

Email address: _____

Please describe how this person has worked to improve the quality of life in Laurel (100 words or less)

Please provide a short biographical history of nominee (100 words or less, including number of years' residency, profession, other pertinent history, etc.)

Nominated by (self nominations accepted): _____

Address: _____

City: _____ State: _____ Zip: _____

Daytime Phone: _____ Evening Phone: _____

Email address: _____

Please fax form to 301-725-6831 or mail to City of Laurel, Citizen of the Month, c/o Councilmember Gayle Snyder, 8103 Sandy Spring Road., Laurel, MD 20707. Call the Council office at 301-725-5300 x120 if you have any questions.