

Healthy Polk 2010 Recognition Nomination Form

Healthy Polk 2010 believes we need to celebrate our successes and the successes of all who help our community meet the Healthy Polk 2010 goals. If you have a person(s) or organization that you believe should be recognized for their support of Healthy Polk 2010 please complete this form. Recognition will happen at the Town Hall meeting closest to the time of nomination.

Name of Nominee: (person(s) or organization) _____

Contact person if an organization: _____

Contact information

Phone number: _____

e-mail: _____

Mailing address: _____

Reason for Nomination:

Nominated by: _____

Phone number: _____

e-mail: _____

Date: _____

HEALTHY POLK 2



Partnering for a healthy community

Return this form to:

IOWA STATE UNIVERSITY
University Extension

Susan B. Klein
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November 9, 2006