

**NOMINATION FORM FOR
INDIANA PARALEGAL ASSOCIATION, INC.
2018 PARALEGAL AWARDS**

Please circle the award for which you are nominating:

Paralegal of the Year

Lifetime Achievement

Outstanding New Member of the Year

Employer of the Year

Outstanding Board Member of the Year

Name of Nominee: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Telephone: _____ E-mail: _____

Please describe why you believe the nominee meets the criteria for the selected award.

Name of Person Submitting Nomination: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Telephone: _____ E-mail: _____

Please complete and submit this form **no later than May 15, 2018** to: Lottie Wathen, IRP,
IPA Vice-President, by e-mail llw@whzlaw.com or by fax at (317) 638-5533.