
CLARION COUNTY ASSOCIATION OF TOWNSHIP OFFICIALS

www.ClarionCountyATO.org

Supporting government serving people

President

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June 14, 2019

TO: All Officials
FROM: Anne Andes, President
RE: **29th Annual Awards (deadline for entry is September 7, 2019)**

Purpose of the Awards Program

To Honor a Township Official or Employee and a Township who has achieved or helped to achieve outstanding accomplishments that have benefited their Township or County.

ELIGIBLE ENTRANTS

1. INDIVIDUAL AWARD

- a. A Township Official or Employee who held an office or was employed during the past year.
- b. An individual may be nominated for recent or lifetime achievements.
- c. Has shown that they have significantly accomplished a program(s) or a project(s) that has benefited their Township or County.

Eligible Individual Entrants may be nominated by an elected or appointed official of the same Township or by one of the County Association Officers.

2. TOWNSHIP AWARD

- a. A township which has demonstrated the purpose of Township government to protect and improve the quality of life and safety of its residents.
Examples: Local Government cost-cutting, coordination of local volunteer efforts, the advancement of Township goals with respect to State or Federal regulations, establishment of new services or programs, or the success of local development projects.
- b. This award may be shared between municipalities if they have collaborated on projects and/or services together that have benefited their residents.

Eligible Township Entrants may be nominated by an elected or appointed official of any Township or by one of the County Association Officers.

Please give your consideration to selecting your township or an official from your township for these Awards. After selecting your nominees, please return them in a **Separate Envelope** and mark "**NOMINEE**" on the outside of the envelope, as this will be given to the Awards' Selection Committee.

CLARION COUNTY ASSOCIATION OF TOWNSHIP OFFICIALS
29th ANNUAL **OUTSTANDING INDIVIDUAL AWARD**

NOMINATION FORM
Deadline: September 7, 2019

NAME OF NOMINEE _____

POSITION _____

TOWNSHIP _____

COUNTY _____

ADDRESS _____

CITY _____ PA, ZIP _____

I HAVE NOMINATED THE ABOVE PERSON BECAUSE:

(Summary of Accomplishments: summarize the accomplishments for which nominee is being nominated addressing the following criteria: outstanding accomplishments through programs or projects that benefited their Township and whose service to the Township exhibits the high standard of dedication, creativity and leadership)

(Use back of form if more space is necessary)

NAME AND ADDRESS OF PERSON MAKING NOMINATION:

NAME: _____

TOWNSHIP _____ OFFICE: _____

(supervisor, secretary, tax collector, auditor)

ADDRESS _____

TELEPHONE NUMBER (_____) _____

DATE SUBMITTED _____ SIGNED _____

Return To: Stephen C. Allison, 630 Schoolhouse Road, Fairmount City, PA 16224

Write **NOMINEE** on envelope