## COMMISSIONERS' CHOICE AWARDS Application Form

PLEASE CHECK:
CATEGORIES:ADULT ORGANIZATION
YOUTH ORGANIZATION
COMMUNITY/ORGANIZATION:
DATE:
CONTACT PERSON:PHONE:_()
ADDRESS:
EMAIL:
NUMBER OF MEMBERS IN YOUR ORGANIZATION:
PRIMARY PURPOSE OF YOUR ORGANIZATION:

Return by Monday, March 23 to: North Carolina Cooperative Extension-Alexander County Center 151 West Main Avenue, Suite 2 Taylorsville, NC 28681

Phone: 828-632-4451

## Report Form

	Report Form
1.	List programs and/or projects you have conducted and/or participated in during 2019?
2.	How did you and/or your organization benefit your community during 2019?
at least organiz	Optional: If at all possible please attach supporting materials such as newspaper articles, es, awards, etc. or send up to 5 digital pictures to <a href="mailto:lenny_rogers@ncsu.edu">lenny_rogers@ncsu.edu</a> . Please include to one picture, and a colored picture of your logo if you have one to feature your zation on awards night via Power Point slide presentation. (All items will be returned after s night.)

rson needs to be a true "Spark" or catalyst to projects of the organization. This omination is optional. ( <b>Previous ''Community Spark Award'' winners are not</b> .)