

# 2019 SCHOLARSHIP PROVIDER OF THE YEAR AWARD

## NOMINATION FORM

### \* 2. Nominator Information

Nominator Name

Nominator Organization

Nominator Email Address

### \* 3. Nominee Information

Which NSPA member organization are you nominating?

Contact Name

Email Address

### \* 4. Nominating Category

Scholarship Provider

College or University

### \* 5. Why do you believe this organization/institution should be recognized as a 2019 Scholarship Provider of the Year? Please limit your response to 150 words.

### 2019 SPOY Nomination Form Preview

Do NOT submit this form

To nominate an organization for the 2019 SPOY Award visit

<https://www.surveymonkey.com/r/HZYBCFH>