



2017-Service Awards Official Nomination Form
This nomination is submitted for the following award:

Award: _____
(Write in the name of the award – specify only ONE award per nomination form.)

Nominee: _____ ANA Member #: _____

Address: _____

City: _____ State: _____ Zip: _____

Telephone: _____ Date of Birth: _____

The above nominee deserves this honor because of his/her contributions to and achievements in the field of numismatics, which are as follows: (Attach additional sheets as needed.)

Nomination Submitted by: _____

Signature and Date

**PLEASE NOTE: TO BE VALID, A BIOGRAPHY MUST BE INCLUDED CONTAINING
50-100 WORDS FOR EACH NOMINEE.**

INCLUDED FOR YOUR CONVENIENCE IS AN OFFICIAL BIOGRAPHY FORM.

DEADLINE: NOMINATIONS ARE DUE BY NOON MOUNTAIN TIME JANUARY 15, 2017.

By E-mail: arahn@money.org

By Fax: 719.634.4085

By Mail:

American Numismatic Association, Attention: Awards Coordinator
818 North Cascade Avenue, Colorado Springs, Colorado 80903-3279

**American Numismatic Association
Official Biography Form**

Name: _____ ANA Member #: _____

Use the space below to list any international, national, regional or local numismatic organizations of which the nominee is/was a member.

List any offices your nominee has held and the year(s). (Example: Secretary, 1998-1999; Vice-President 1999-2001; etc.)

Organization:

Offices held – title and year(s):

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Please list numismatic accomplishments:

Please attach additional sheets as required.

Please list published numismatic works:

Title:	Publisher:	Date:
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Please list numismatic awards:

Year Received:

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Personal information: **(Optional)**

Military service: _____ Rank: _____

Educational background:

_____	High School	
_____	College or University	
	Name(s): _____	
	Degree: _____	Year(s): _____
_____	Graduate or Professional School	
	Name(s): _____	
	Degree: _____	Year(s): _____
	Title(s): _____	

Please list numismatic collecting specialties:

_____	_____
_____	_____
_____	_____
_____	_____

American Numismatic Association
818 North Cascade Avenue, Colorado Springs, Colorado 80903-3279
Tel: 719.482.9867 Fax: 719.634.4085