



PARTNERS IN EDUCATION NOMINATION FORM

To nominate a Partner in Education, fill out this form and use the space below to tell us why said business/ organization is deserving of the honor.

Organization name: _____

Number of years involved with campus: _____

Reason nominated: _____

Your name/position: _____

School/Department: _____ Phone: _____

Email Address: _____

Your signature: _____ Date: _____

Nominator information must be filled in and signed. Email the form to svilla@episd.org. For more information, please call Sonia Villa, Community Engagement at 915-230-2570.

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