Unit Entry Form
for

Unit Membership Merit Award

(Please Type or Print Legibly)

Nominated by: _____ **Member ID#:** _____

Department: _____

Legal Name of Auxiliary Unit _____

Unit Address: _____

City: _____ **State:** _____ **Zip Code:** _____

Criteria that must be addressed in narrative *Demonstrate the Best Practices in "RECONNECTING" with:*	
✓	**Members – Recruiting/Retaining with an increase from last year's 12/31/10 total**
✓	**Veterans – Increasing volunteer VAVS hours by 5% from last year's total 10/31/10**
✓	**Community – Reaching individuals outside ALA through Outreach Programs/Activities**

To submit a handwritten narrative, please use the front (and back if necessary) of this form
If submitting a typed narrative on a separate sheet, please attach this form to the front.

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DUE – June 1, 2012 to your National Division Membership Chairman
*See Membership Committee Contact List for mailing addresses

THIS FORM MAY BE DUPLICATED

ANY MODIFICATION TO THIS AWARD FORM WILL NOT BE ACCEPTED AS AN ELIGIBLE ENTRY.