



MEXICAN AMERICAN FIRSTS:
TRAILBLAZERS OF AUSTIN AND TRAVIS COUNTY

NOMINATION FORM

Deadline for submission

September 30, 2009

RETURN COMPLETED FORM TO:

Gloria Espitia
Neighborhood Liaison
Austin History Center
810 Guadalupe St.
Austin, Texas 78701
P.O. Box 2287
Austin, Texas 78768-2287
(512) 974-7498
Fax (512) 974-7483

E-Mail Address: gloria.espitia@ci.austin.tx.us

MEXICAN AMERICAN FIRSTS:
TRAILBLAZERS OF AUSTIN AND TRAVIS COUNTY
NOMINATION FORM

(Please provide as much information as possible)

Date Submitted: _____

Nominee Personal Information

Nominee is: Living ____ Deceased ____

Nominee Name: Last _____ First _____ Middle _____

Nickname(s) or Maiden Name _____ Male ____ Female ____

Home Address: _____ City _____ State: ____ Zip code: _____

Home phone # _____ Cell # _____ Other _____

Date and Birth place _____

Date of Death if Deceased _____

Date of Burial and Cemetery location _____

Nominee Family Information

Father's Name: _____ Mother's Name: _____

Spouse's Name: _____ Living ____ Deceased ____

List names of all children and siblings along with contact information of family member who may provide biographical information, photograph and other information necessary to assist in selection process (include attachment page if necessary)

Nominee: _____

Nominee Education

Elementary _____ Jr. High _____ High School _____ College _____ Other _____

Types of Occupations Held by Nominee (include attachment if needed)

<u>Occupation</u>	<u>Name and Location of Employer</u>	<u>Year(s)</u>
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_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Nominee Membership Involvement and Office(s) Held (community, civic, fraternal, business and other organizations) Indicate whether local, state or national.

Nominee: _____

**Nominee Major Awards and Honors Received by Nominee and Year(s) Received
(include attachment if needed)**

Other Information about Nominee

“You may include additional information, such as news clippings, publications, etc., to supplement your nomination.” All information submitted to the Austin History Center will become property of the City of Austin.

Nominee: _____

Nominator Information

Name of Nominator _____

Address _____

Contact Number _____ Relationship to Nominee _____

Types of resources provided with this nomination form:

Photograph _____ Newspaper article(s) _____ Photographs _____ Publications _____

Other _____

Signature of nominator and date signed

Signed by _____ Date _____