Wall of Recognition

Application Form



Nominee Information	Nominator Information
Is the nominee a Rocklin resident, Rocklin based business or organization? Or was the	Name of Nominator:
nominee a Rocklin resident or business or organization at the time of their community service?	Contact (Phone):
Yes No	Contact (Email):
Name of Nominee:	City Affiliations
Address:	Please describe any association between the nominee and the City of Rocklin:
Contact (Phone):	
Contact (Email):	
	Please list the dates of the nominee's city affiliations:

Eligibility	
Please indicate the area of impact (i.e. resident, business/work, school, organization, etc.) and length of residence (if applicable).	
Provide detailed information about how the nominee has:	
 Demonstrated creativity and/or initiative in providing service to the community 	
• Provided long-term service to the community	
 Provided unique contributions that are marked by excellence and worthy of honor 	
 Made a distinct, significant contribution to the betterment of the city 	When did the community service take place?
 Demonstrated exceptional determination, character, commitment and/or leadership 	
Describe the community service performed by the nominee that merits consideration of a Wall of Recognition award. If the nominee is a business, group, or organization, please also describe the main goal of the entity that is being nominated:	Please include any other information about the nominee you feel is important: