



**SOUTH CAROLINA CHAPTER OF
THE NATIONAL ASSOCIATION OF BLACKS IN CRIMINAL JUSTICE**

SC-NABCJ AWARD APPLICATION

Name of Nominee: _____

Address: _____ City: _____ State: _____ Zip: _____

Employer: _____

Employer's Address: _____ City: _____ State: _____ Zip: _____

Present Job Title: _____ Length of Service: _____

Telephone: Work # _____ Home # _____ Cell # _____

E-mail Address: _____

Award Category:

- SC-NABCJ Distinguished Service Award**
- SC-NABCJ Community Service Award**
- SC-NABCJ Outstanding Student Award**

List significant contribution(s) to SC-NABCJ or the Criminal Justice field:

List significant activities on behalf of SC-NABCJ and/or other professional organizations:

List significant contribution(s) and/ or involvement in community service activities:

List other professional association memberships/affiliations:

PLEASE ATTACH A BRIEF BIOGRAPHICAL SKETCH, RESUME, OR OTHER PERTINENT INFORMATION.

NOMINATION SUBMITTED BY: _____

ADDRESS: _____

TELEPHONE: _____

E-MAIL: _____

Return Nomination Form To:

**SC-NABCJ
Attention: Awards Program Chairperson
Post Office Box 21928
Columbia, SC 29221-1928**