



Nomination Form for Naming County Assets

Nomination Type:

Nomination Date:

1. County Asset Information

Type:

Common Name:

Address:

City:

Zip Code:

Supervisorial District:

Program Contact:

Phone Number:

Email:

Program Department:

Department Director:

Describe Program:

2. Nominator (Applicant) Information

Type:

Contact: First Name:

MI:

Last Name:

Address:

City:

State:

Zip Code:

Phone Number:

Alternate Phone Number:

Email:

Relation to Nominee:

Group/Organization:

3. Nominee Information

Type:

First Name:

MI:

Last Name:

Deceased:

Resident of Santa Barbara County

Yes

No

Last Year of Residency:

Provide date if applicable

Group/Organization Name:

Case for Nomination (~500 words) *You may copy and paste your statement into the field below. Field is limited to about 500 words, a more detailed statement may be attached, but limited to one page..*

Required Attachments

Three Support Letters

Each letter of support is limited to a single page.

Image of Nominee

Must be at least a 300dpi color image.

Nominee Biography

This document should be concise and limited to four pages

Nominee Death Certificate

Simple copy will suffice for the record.

Nominee Concurrence:

The information on this Nomination Form is true and accurate to best of my personal knowledge and is submitted in good faith to advance the dedication of the named asset in honor of the Nominee.

Signed By:

Printed Name

Signature locks nomination information, Sections 1, 2 & 3 from edit.

4. Internal Review (County Use Only)

Nomination (Does) (Does Not) meet the requirements of the Policy on Naming County Assets.

Recommended By:

Date: