



UTAH INTERSCHOLASTIC ATHLETIC ADMINISTRATORS ASSOCIATION NOMINATION FORM

UIAAA CITATION AWARD

Presented to one individual from the state each year in recognition of their contributions to athletic administration at the local, state and national levels. Nominations will be taken from current athletic administrators who are members of the UIAAA.

Nominee's Name: _____

School/District or place of Employment: _____

Street Address _____ City _____ State _____ Zip _____

Office Phone: (_____) _____ Cell Phone: (_____) _____

Nominee is RAA ___ CAA ___ CMAA ___ None ___ E-Mail: _____

Years Athletic Administrator: _____ # Years NIAAA member: _____ (if applicable)

Service at the Local Level:

Service at the State Level:

Service at the National Level (if applicable):

Must be postmarked by October 31st – Mail completed form to:

**UIAAA
199 East 7200 South
Midvale, Utah 84047**