



NOMINATION FORM  
SAMLIEBERMAN REGENTS AWARD FOR  
STUDENT SCHOLARSHIP

This form must be accompanied by a letter of nomination, a one-half page biography of the nominee, and any supplementary materials as determined by the institution.

NSHE INSTITUTION \_\_\_\_\_ ACADEMIC YEAR \_\_\_\_\_

FULL NAME OF NOMINEE \_\_\_\_\_

NICKNAME (IF NOMINEE GOES BY ANOTHER NAME) \_\_\_\_\_

PHONETIC SPELLING OF NAME \_\_\_\_\_

MAILING ADDRESS \_\_\_\_\_  
Street Address

\_\_\_\_\_  
City/ State/ Zip Code

EMAIL ADDRESS \_\_\_\_\_

HOME OR CELL PHONE NUMBER \_\_\_\_\_

\_\_\_\_\_