

**BUSINESS PROFESSIONALS OF AMERICA  
FLORIDA ADVISOR OF THE YEAR  
NOMINATION FORM**

- Eligibility: Any current professional Florida BPA local advisor. Please note that current board members, contracted service providers, and anyone who receives compensation from BPA are ineligible for this award.
- Nominations may be made from any current BPA advisor or student member.
- Completed forms should be submitted by January 13<sup>th</sup> of current year to:

[dalexander@flbpa.org](mailto:dalexander@flbpa.org) Include this 2-page form plus any supporting documentation.

Please include a cover letter explaining why the nominee should be recognized.

- Does the nominated advisor plan to attend the SLC? YES / NO
- One advisor from each area will be recognized at the State Leadership Conference.

The advisor named below has made outstanding contributions to the local, state and national levels, and is worthy to represent Florida as Advisor of the Year

\_\_\_\_\_

BPA Advisor or Student Nominator's Name                      Nominator's School

Nominator's email: \_\_\_\_\_

BPA Area \_\_\_\_\_ Region \_\_\_\_\_ Date: \_\_\_\_\_

.....

BPA would like to send a letter of recognition to the Advisor's school principal. Please provide the contact information:

Principal's Name: \_\_\_\_\_

School Name: \_\_\_\_\_

School Address: \_\_\_\_\_

City/Zip: \_\_\_\_\_

School Phone # \_\_\_\_\_

Email Address: \_\_\_\_\_

**NOMINATION FORM  
Part #2**

Name of Nominee: \_\_\_\_\_

Work Phone: (\_\_\_\_) \_\_\_\_\_ Home Phone: (\_\_\_\_) \_\_\_\_\_

Current Position/Title: \_\_\_\_\_ EMAIL: \_\_\_\_\_

Number of Years the Nominee has been a Local BPA Advisor: \_\_\_\_\_

Local Level Involvement in BPA:

State Level Involvement in BPA:

-----  
National Level Involvement in BPA:

Educational Honors and/or Recognition:

Hobbies/Interesting Trivia:

Professional & Civic Memberships:

Organization

Offices Held

Committee Work