

## Sponsor Nomination Form

**Instructions:** This form is to be completed by the ABOTA member who is nominating the candidate. The Nominee should not complete this form. Please email a copy to <a href="mailto:tenn@abota.org">tenn@abota.org</a>

				Date:
Nominee Name (Mr./Ms./Mrs./Hon.):				
Firm:				
Firm Address:				
City:	State:		Zip:	
Email Address:				
Phone:	Cell:		Fax:	
Nominee's primary area of practice:	☐ Plaintiff ☐	Defense [	Both	☐ Judge
Nominated by (please PRINT):				
How long have you known the nominee?				
How do you know the nominee?				
Why do you think the nominee would male	ke a good steward of ABOTA?	,		
☐ Affirmation:				
I affirm that the Nominee is of high persor				
American Board of Trial Advocates' Code				
adversaries; resolves matters and disputes honors the spirit and intent, as well as the	•			
Nominator signature (required):			Date:	
Nominator name (please PRINT)			OFFICE	E USE: