

## 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:georgia@abota.org">georgia@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 make	e a good steward of ABOT	۹?		
☐ Affirmation:				
I affirm that the Nominee is of high persona	al character and honorable	reputation; ar	nd conducts his/he	er practice in keeping with the
American Board of Trial Advocates' Code o	f Professionalism. Specifica	lly, the Nomin	ee is respectful in	his/her conduct towards all
adversaries; resolves matters and disputes e			_	-
honors the spirit and intent, as well as the re	equirements of applicable	rules and code	es of professional	conduct.
Nominator signature (required):			Date:	
Nominator name (please PRINT)			OFFIC	CE USE: