



**Metro Area Mayors' Committee
For People With Disabilities**
Serving Dilworth, Fargo, Moorhead and West Fargo
www.fmareamayorscommittee.org

ADVOCATE/SPECIALIST

Name/Agency: _____

Address: _____

City: _____ State: _____ Zip: _____

Name of person making nomination: _____

All nominations must be post marked on or before Friday, April 13th.

The Advocacy/Specialist award is given to an individual who has contributed to supporting people with disabilities. This individual has displayed professionalism to the consumer, community and as a result of their efforts has reduced barriers for inclusion. In the space below write a narrative describing some situations that have occurred to demonstrate their work. **After completing this form mail it to MAMC PO Box 162 Fargo, ND 58107 or email it to tgdesautel@nd.gov**