## 2025 GOLD Awards Nomination Form

(Please Print)

Nominee's Information	
Name:	
Address:	
City, LA: Zip	
Phone Number:	
Email:	
Is the Nominee aware they are being nominated? YES □ NO □ Which award are you nominating the person/organization/animal? Choose an item.	
Your Information	
•	ust be present at the ceremony and provide an introduction if the nominee is selected.)
Name:	
Address:	
City, LA: Zip	
Phone Number:	
Email:	

## Nominations are due by Monday, November 3, 2025

Submit nominations to:

Disability.affairs@la.gov

Or mail to Governor's Office of Disability Affairs 1051 N. 3<sup>rd</sup> St, Suite 136 Baton Rouge, LA 70802

## Incomplete packets will not be considered.

## All nomination packets must include the following:

- 1. Completed nomination form.
- 2. Letter of recommendation describing the nominee's achievements and contributions.
- 3. Letters of support from others.