



# Adult Role Model Award 2017

Tell us more about your Role Model!

Check if this Role Model is 21 years of age or older

Role Model Name: \_\_\_\_\_

How do you know your Role Model? \_\_\_\_\_

Where does your Role Model work, coach etc: \_\_\_\_\_

Please give the place you know them from and their title.

(ex: Teacher, Parent, School Counselor, Pastor, Youth Group Leader, Coach, etc.)

\_\_\_\_\_

What is their phone number (if you know one)? \_\_\_\_\_

E-mail? \_\_\_\_\_

Tell us more about you!

Check if you are 21 years of age or younger

Your name: \_\_\_\_\_

Your age: \_\_\_\_\_

Your ethnicity:  African American/Black  Asian  Caucasian/White  
 Hispanic/Latino  Native American  Mixed Race  Other

If you're still in school, your grade: \_\_\_\_\_ and your school: \_\_\_\_\_

If you win a prize or if we have more questions we will need to call you.

What is your phone number? \_\_\_\_\_

Please submit this completed nomination form to:

Cheryl Bowdridge  
San Juan Basin Public Health  
502 S 8th Street  
Pagosa Springs, CO 81147

Or e-mail to [cbowdridge@sjbpublichealth.org](mailto:cbowdridge@sjbpublichealth.org)  
Or fax to 970 264 4640

Questions? E-mail or call 970 264 2409 x204

**Nomination forms are due March 13**

SAN JUAN BASIN  
**public health**

[sjbpublichealth.org](http://sjbpublichealth.org)

Durango Office  
281 Sawyer Drive  
Durango, CO 81303  
970 247 5702

Pagosa Springs Office  
502 S 8th Street  
Pagosa Springs, CO 81147  
970 264 2409

**How  
are  
you?**