



2019 Utility Worker Heroes Recognition

Official Nomination Form

Hero No	ominee's Information	
	First Name	Last Name
	Address	
	City	State Zip
	Phone (H)	Phone (C)
	Local #	
Nomina	tor's Information:	
	First Name	Last Name
	Address	
	City	State Zip
	Phone (H)	Phone (C)
	Local #	Email
Heroic A	•	etween July 1, 2015 and March 31, 2019) Date
Explana	tion of Heroic Act: (Inc	e attachment for additional explanation if needed)
Did the s	story appear in media?] TV □ Radio □ Newspaper □ Other

Submit form and attachments by April 15, 2019

Via Email convention@uwua.net
Via US Mail 1300 L Street, NW, Ste 1200,
Washington, DC 20005
Via Fax (202) 899-2852

You may also submit using a Word or PDF fillable form online at: