The Alaska Society of Certified Public Accountants is looking for nominations for the Public Service Award. We are looking for individuals who have an on-going commitment of service to the community. They must hold CPA certificates in good standing and be members of both the Alaska Society (AKCPA) and the American Institute of CPAs (AICPA).

The Board of Directors will consider candidates who meet the following criteria:

- Participate in community, charitable or other civic activities on an on-going basis
  
  Or

- Have taken responsibility for a public service project which had a significant positive impact on the community

  Or

- Have serviced in a notable volunteer capacity in government at the local, state or national level

  Or

- Have written articles which have encouraged participation in and / or implementation of community projects

  Or

- Have served in an outstanding manner as an appointed or elected official at the local, state or national level
ALASKA SOCIETY OF CERTIFIED PUBLIC ACCOUNTANTS

NOMINATION FOR PUBLIC SERVICE AWARD

Nominee Name: ____________________________________________
Nominee Address: ____________________________________________
Nominee Phone: ____________________________________________
Nominee Email: ____________________________________________

1. Organization: ____________________________________________
   Position Held: ___________________________ Number Of Years: ______
   Position Held: ___________________________ Number Of Years: ______
   Nominee’s Activities & Accomplishments:
   ____________________________________________
   ____________________________________________
   ____________________________________________

2. Organization: ____________________________________________
   Position Held: ___________________________ Number Of Years: ______
   Position Held: ___________________________ Number Of Years: ______
   Nominee’s Activities & Accomplishments:
   ____________________________________________
   ____________________________________________
   ____________________________________________

Nominator Name: ____________________________________________
Nominator Address: ____________________________________________
Nominator Phone: ____________________________________________
Nominator Email: ____________________________________________
Special Considerations: ____________________________________________

Please Return To:

Alaska Society of CPAs
2600 Cordova Street, Suite 211
Anchorage, AK 99503

Or

akcpa@ak.net