



Mayor of the Year Award

Applicant Information

Name: _____
Last First City and City Population

Served in elected municipal office a minimum of two years? YES NO

Currently elected as mayor? YES NO

Member of the Iowa Mayors Association? YES NO

****May not receive the award more than once.****

Member of the Iowa League of Cities? YES NO

Nomination Information

In your view, what has this person done to provide extraordinary service to city government, their community and local region or the Mayors Association? Why do you feel this person should receive the Mayor of the Year Award?

Nominated by

Email the application to alankemp@iowaleague.org and mikearmstrong@iowaleague.org

Signature: _____ Date: _____

City: _____

Phone: _____ Email: _____