



NEW YORK
CITY BAR

**Kathryn A. McDonald Award for
Excellence in Service to Family Court**

NOMINATION FORM

INSTRUCTIONS:

1. Nominees are limited to people who have demonstrated an excellence in service to the Family Court. Potential nominees can include lawyers, social workers, and court personnel. Sitting Family Court judges may not be nominated for this award.
2. References listed on the nomination form should be advised that their names have been submitted to the City Bar and they should be willing to speak with the nominating committee.
3. There is no limit to the number of nominations that one person can make.
4. Nominations for this award may be supplemented by optional letters of support from the three individuals listed on the nomination form as references familiar with the work of the nominee. Letters submitted beyond those from the three references listed on the form will not be considered.
5. Nomination Forms should be returned to:

Kathryn A. McDonald Award
c/o Executive Director's Office
New York City Bar
42 West 44th Street, New York, NY 10036
Fax: 212-398-6634
Email: ecohen@nycbar.org

6. Nominations should be submitted before **April 13, 2018**.
7. A list of past McDonald Award winners can be found here:
<http://www.nycbar.org/about/awards-and-special-lectures/the-kathryn-a-mcdonald-award>

McDonald Award Nomination

Nominee _____ **Title** _____

Organization _____

Address _____

Phone _____ **Email** _____

Number of Years in the Family Court _____

Reasons for Nomination (Quality of Work, Relationship to Court, Creativity in Work, and Impact of Work in Family Court)

(You may add additional pages)

Individuals familiar with Nominee's work (please do not list anyone who has not agreed to act as a reference for the nominee):

1) Name _____ Title _____

Organization _____

Address _____

Phone _____ Email _____

2) Name _____ Title _____

Organization _____

Address _____

Phone _____ Email _____

3) Name _____ Title _____

Organization _____

Address _____

Phone _____ Email _____

Nominator _____ Title _____

Organization _____

Address _____

Phone _____ Email _____