



**City of Oak Hill**  
234 South U.S. Highway 1  
Oak Hill, Florida 32759

**CITIZEN OF THE MONTH  
NOMINATION FORM**

**(Please type or print)**

Full Name of Nominee: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

On the Second Page of this form:

1. Describe the outstanding activity performed by the nominee.
2. What was the impact of his/her action on the community?
3. Explain why you feel this person deserves to be the "Citizen of the Month".

Nominations must be turned in to City Hall or the Post Office no later than the last Monday of the Month in order to be considered for the next month's award.

Signature of Nominator: \_\_\_\_\_

Telephone: \_\_\_\_\_ Email: \_\_\_\_\_

Address: \_\_\_\_\_

