

**ARKANSAS TRAIL ORGANIZATION OF THE YEAR NOMINATION FORM**

Group/Organization: \_\_\_\_\_

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

\_\_\_\_\_ E-mail Address: \_\_\_\_\_

**The organization's efforts on Arkansas trails:** List examples of work projects, specifying organization's role. (Include information such as: number of hours worked, number of trails on which the organization has worked, number of years the organization has been involved in trail efforts.) \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**The organization's efforts at coalition building:** (Explain partnerships formed with user groups, agencies and organizations.) \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Significant trail accomplishments:** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Accomplishments in promotion and education related to trails in Arkansas:** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Name of person/organization making nomination: \_\_\_\_\_

Telephone/E-mail (preferred method of contact): \_\_\_\_\_

Additional letters of reference are welcome.

**Submit nominations to Mike Sprague, One Capitol Mall, Little Rock, AR 72201 or as an email attachment to [michael.sprague@arkansas.gov](mailto:michael.sprague@arkansas.gov).**