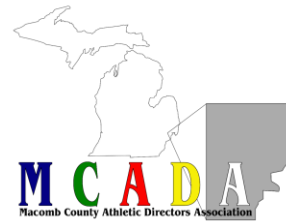


Macomb County Athletic Directors Association
Nomination Application for Dave Jackson
DISTINGUISHED SERVICE AWARD INDUCTION 2025
 (Completed Application must be submitted by June 1, 2024)



Full Name _____ Male _____ Female _____

Address _____ City/ State _____ Zip _____

Email _____ Phone # _____

Volunteers Only: Please fill out the section below

Job performed	Sport Served	Grade Level	School	Total Years

Officials only: Please fill out the section below

Total number of years of officiating in Macomb County: _____

List sports you officiated in Macomb County	Grade level	Total Years officiated in Macomb County
1		
2		
3		
4		
5		
6		

Narrative (on a separate piece of paper please answer the following:

- Within this narrative please answer the following questions:
- (1) What made working with the athletic program/athletes enjoyable to you?
 - (2) Describe a memorable moment or moments in your years of service.
 - (3) Please list any other service you may have provided that is not listed above.
 - (4) Do you have any other pertinent information that you would like to provide to the committee?
 - (5) List 2 references with contact information so we can contact for quotes.

Submitting Athletic Director

School Name _____ Athletic Director _____

Date submitted _____ AD phone _____

Signature of Athletic Director _____