



## CONNECTICUT STATE POET LAUREATE NOMINATION FORM - FY2010

**Deadline: March 31, 2010**

**Send completed application to:** An-Ming Truxes, Connecticut State Poet Laureate Program, Connecticut Commission on Culture & Tourism, One Constitution Plaza, Second Floor, Hartford, CT 06103

**EVERY BLANK MUST BE FILLED IN (N/A WHERE APPLICABLE) IN ORDER FOR THIS FORM TO BE CONSIDERED COMPLETE AND READY FOR REVIEW.**

### NOMINEE INFORMATION

Nominee \_\_\_\_\_  
 Street Address \_\_\_\_\_  
 City/State/Zip \_\_\_\_\_  
 Telephone \_\_\_\_\_ E-mail \_\_\_\_\_

### NOMINEE'S LEGISLATIVE INFORMATION (OBTAIN FROM TOWN CLERK OR VOTESMART.ORG)

U.S. Representative \_\_\_\_\_ District # \_\_\_\_\_  
 State Senator \_\_\_\_\_ District # \_\_\_\_\_  
 State Representative \_\_\_\_\_ District # \_\_\_\_\_

### CERTIFICATION

I give the nominator permission to submit my name for the position of State Poet Laureate. I certify that the nominee information is true and accurate and that the work sample submitted is an accurate representation of my work.

Signature of Nominee \_\_\_\_\_ Date \_\_\_\_\_

### NOMINATOR INFORMATION (PLEASE PROVIDE E-MAIL ADDRESS - ALL NOTICES, CORRESPONDENCE, CONTRACTS ETC WILL BE SENT VIA E-MAIL ONLY)

Nominator \_\_\_\_\_  
 Street Address \_\_\_\_\_  
 City/State/Zip \_\_\_\_\_  
 Telephone \_\_\_\_\_ \*E-mail \_\_\_\_\_

*\* Required - all notices and information regarding applications will be sent by email ONLY to application contact person.*

### SIGNATURE

Under penalties of perjury, I declare that I have examined information contained in this nomination and accompanying documents and, to the best of my knowledge and belief, they are true and correct. I am aware that the submission of any false information or omission of any pertinent information resulting in the false representation of a material fact may subject me to civil and/or criminal penalties for filing of false public record. I further declare that I have reviewed the Commission on Culture & Tourism's Grant Overview Guidelines and acknowledge that it is my responsibility as a nominator to become familiar with these guidelines and that failure to comply could result in ineligibility for the program. I understand that should I have any questions regarding these guidelines, I may contact CCT. I further understand that all documents submitted become the property of CCT. CCT will not reprint any submissions for publication and will abide by any copyrights.

Printed Name \_\_\_\_\_  
 Signature \_\_\_\_\_ Date \_\_\_\_\_

**FOR OFFICE USE:** APP # \_\_\_\_\_

**CHECKLIST**

Please assemble your nomination packet in the following order and provide six (6) copies (one original and five photocopies):

- 1. Completed Nomination Form dated and signed by nominee and nominator.
- 2. One-page narrative
- 3. Resume, including a list of published works, awards, honors or other recognition.
- 4. Two letters of support (maximum three)
- 5. Work sample of no more than ten poems. The total work sample may not exceed 15 continuously numbered 8 and ½ x 11 pages (one side) and no smaller than 11 point type. Please provide copyright information where appropriate. All work sample submissions must be typewritten or computer generated. Materials hand-written will not be accepted.