



## Nomination Form

### Mary Utopia Rothrock Award

#### Funding

The interest from the endowment of Mary Utopia Rothrock supports this award.

#### Purpose

The award recognizes outstanding contributions to librarianship in the Southeast. This is the highest honor bestowed by SELA on leaders in the library field.

#### Award

The winner will be presented with a plaque, a lifetime membership in the Southeastern Library Association, and a check for \$100. Winners attending the 2024 Annual Conference will be presented with the award at a special event.

#### Criteria

1. Age and years of service are not a deciding factor in the selection. Those librarians early in their careers or many years of service who have contributed exceptionally to the field may be considered.
2. The award will be made to up to one person in a biennium, and an award may be omitted if no suitable nomination is received.
3. Service in one or more states of those served by the Southeastern Library Association will qualify a person for nomination.
4. Please send your nominee's name and a narrative of their professional and association activities, civic organizations, writings, editorial contributions, single events, or other honors received.
5. You can request additional documentation in case of finalists.
6. The person making the nomination must be a member of SELA, but the nominee need not be.
7. Submit nominations on this form and any accompanying material to the Rothrock Award Committee Chair by May 1, 2024.

**Dr. Linda Marie Golian-Lui**  
Chair, SELA Mary Utopia Rothrock Award Committee  
Dean, Florida Atlantic University  
Boca Raton, FL  
[lgolian@gau.edu](mailto:lgolian@gau.edu)  
561/287-3717 Mary Utopia Rothrock Award

## Part 1: The Person Being Nominated

Person nominated: \_\_\_\_\_

Nominee's Contact Information:

Name \_\_\_\_\_

Street \_\_\_\_\_

City / State / ZIP \_\_\_\_\_

Phone: \_\_\_\_\_

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

States in which the nominee has served: \_\_\_\_\_

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## Part 2: The SELA Member making the nomination:

Nominator: \_\_\_\_\_

Nominators' Contact Information:

Name \_\_\_\_\_

Street \_\_\_\_\_

City / State / ZIP \_\_\_\_\_

Phone: \_\_\_\_\_

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

**Part 3: Nomination Statement**

Please type the reasons for the nomination below or on a separate sheet. Copies of biographical data, articles on the nominee, and other documentation are welcomed.

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