



## **VERMONT MUNICIPAL CLERKS' AND TREASURERS' ASSOCIATION VMCTA MUNICIPAL ASSISTANT TREASURER OF THE YEAR AWARD**

### **THE AWARD**

The VMCTA Municipal Assistant Treasurer of the Year Award is sponsored annually by the Vermont Municipal Clerks' and Treasurers' Association (VMCTA) to recognize a Municipal Assistant Treasurer who demonstrates professional excellence, dedicated service to their community, and a strong commitment to promoting effective local government.

### **NOMINATING PROCESS & PRESENTATION OF THE AWARD**

- The VMCTA Executive Committee shall appoint an Awards Committee.
- The Awards Committee shall solicit nominations from municipal officials by June 1.
- The deadline for submitting nominations is August 1.
- If no qualifying nominations are received, the Committee may nominate an individual. Any such nomination shall be documented and approved by a majority vote of the Awards Committee.
- The Awards Committee shall order a plaque for the award recipient.
- The award shall be presented by the VMCTA President at the VMCTA Annual Meeting banquet.

### **AWARD CRITERIA**

Nominees shall meet the following criteria:

- Be a member in good standing of the VMCTA.
- Be nominated by a municipal official.
- Have held the position of Municipal Assistant Treasurer for at least three (3) years.
- Be recognized as an individual who demonstrates integrity, professionalism and leadership, and has earned the respect and confidence of their peers.
- Must not have previously received this award.
- Must not be serving as a member of the Awards Committee, VMCTA President, 1st Vice President, or 2nd Vice President at the time of nomination.

### **RECOMMENDED (Optional)**

The following criteria are recommended but not required for eligibility.

- Active involvement in the VMCTA and its programs.
- Service or community involvement beyond their municipality.
- Active participation in or service to professionally related organizations outside of the VMCTA, such as VLCT, VTGFOA, NEGFOA, or GFOA.
- An ongoing commitment to continuing education, including attendance at trainings offered by organizations such as VLCT, VTGFOA, NEGFOA, or GFOA.
- A significant professional accomplishment in the past few years.



**VERMONT MUNICIPAL CLERKS' AND TREASURERS' ASSOCIATION**  
VMCTA Municipal Assistant Treasurer of the Year Award Nomination Form

*Deadline: All materials must be received by August 1.*

**Nominee Name:** \_\_\_\_\_ **Municipality:** \_\_\_\_\_

**Year became a Municipal Assistant Treasurer:** \_\_\_\_\_

**Is the nominee an active VMCTA member?**  Yes  No

**Is the nominee a past award recipient?**  Yes  No

**Is the nominee a current Awards Committee member?**  Yes  No

**Is the nominee the current VMCTA President, 1st VP, or 2nd VP?**  Yes  No

**Instructions**

Please complete the applicable sections below. Attach additional sheets if necessary. Supporting documentation and letters of recommendation are encouraged.

• **Reason for Nomination**

Describe why you believe your nominee should be recognized as the VMCTA Municipal Assistant Treasurer of the Year.

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• **Integrity and Leadership**

Provide an example of when the nominee demonstrated integrity and leadership and earned the respect and confidence of their peers.

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**Optional Sections (Recommended Criteria)**

These sections are optional and will not disqualify a nominee if left blank.

• **Vermont Municipal Clerks' and Treasurers' Association (VMCTA) Involvement**

Describe the nominee's active involvement and leadership within the VMCTA.

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- **Community or Regional Service Beyond Municipality**

Describe the nominee’s service or community involvement beyond their municipality.

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- **Professional Organizations**

Describe the nominee’s participation in or service to professionally related organizations (e.g., VLCT, VTGFOA, NEGFOA, or GFOA).

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- **Continuing Education**

Describe the nominee’s commitment to continuing education, including training attended outside of the VMCTA.

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- **Significant Accomplishments**

Describe any notable professional accomplishments achieved by the nominee in the past few years.

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**Nomination prepared and submitted by:**

Name: \_\_\_\_\_

Title: \_\_\_\_\_

Municipality: \_\_\_\_\_

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

**For Official Use Only**

Date nomination received: \_\_\_\_\_

Reviewed by Awards Committee on: \_\_\_\_\_

Meets all award criteria:  Yes  No

Recommendation:  Approve  Do Not Approve

Committee comments: \_\_\_\_\_