

**North Carolina Association of Women Attorneys**

**2007 BALANCED LIFE WORKPLACE AWARD  
Nomination Form**

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

Daytime Telephone: \_\_\_\_\_

Name and address of the legal employer you wish to nominate:

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

Size of the legal department/law firm: (note this is not just private firms, but includes corporate entities, non-profits and government agencies)

Small (2-5 attys.) \_\_\_\_\_ Medium (6-20 attys.) \_\_\_\_\_ Large (20+ attys.) \_\_\_\_\_

Please describe your relationship to this employer:

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

If you are an employee of this employer, please describe your position with the employer and length of employment:

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

Name and telephone number of at least one representative of the nominee who would be able to provide details about the nominee's employment policies and practices:

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

