PARENT LEADERSHIP NOMINATION FORM

NOMINATE YOUR PARENT LEADER:

- CALL THE PARENT LINE @ 526-1222 OR 1-800-816-1222
- EMAIL THE NOMINATION FORM TO PARENTLINE@CFS-HAWAII.ORG
- INTEROFFICE/MAIL THE NOMINATION FORM TO:
  THE PARENT LINE
  91-1841 FORT WEAVER ROAD
  EWA BEACH, HI 96706

Child & Family SERVICE
A private nonprofit serving Hawai'i since 1899

NOMINATION DEADLINE IS **FEBRUARY 5, 2021**

Nominee Information

Name: _____

Address: _____

Phone #: _____ Email: _____

Why are you nominating this person? (100 words or less)

_____

_____

_____

_____

My Information

Name: _____

Phone #: _____ Email: _____

The Parent Line

Funded by the Hawai'i State Department of Health, Maternal and Child Health Branch (808) 733-4054