

**LOUISIANA HOUSING COUNCIL**  
**OFFICIAL ENTRY FORM**  
**2023 AWARDS COMPETITION**

Please use a separate, fully completed entry form for each entry.  
Submitting agencies must be current members of LHC

|                         | I | II | III | IV | V | VI | VII | VIII | IX | X |
|-------------------------|---|----|-----|----|---|----|-----|------|----|---|
| CATEGORY (check one)    |   |    |     |    |   |    |     |      |    |   |
|                         | A | B  | C   | D  | E | F  | G   | H    |    |   |
| SUBCATEGORY (check one) |   |    |     |    |   |    |     |      |    |   |

NAME OF CATEGORY: \_\_\_\_\_

SUBCATEGORY: \_\_\_\_\_

**AGENCY AWARDS (CATEGORIES I, II and III):**

Name of Agency: \_\_\_\_\_

Address: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Phone: \_\_\_\_\_

Type of Agency:                      Housing                                      Community Development

Number of Units: \_\_\_\_\_ Public Housing                      \_\_\_\_\_ Rental Assistance

Population Served: \_\_\_\_\_

Please securely attach the materials submitted, including information concerning cost and distribution of annual reports and other publications, frequently of newsletters, etc.

**SPECIAL ACHIEVEMENT OR MEDIA RECOGNITION AWARDS (CATEGORIES IV AND V):**

Name of Employee, Tenant, Participant, Agency, Organization, Public Official, Law Enforcement Official, Individual, Broadcast Station or Newspaper or Magazine. Media nominated should be identified by name, the city in which it is published or from which its broadcast, and with the name of the individual responsible for the coverage where possible.

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

Please attach or enclose descriptive information, clippings, tapes, etc. which support the nomination

**STATE CHAPTER AWARDS (CATEGORY VI):**

State Chapter: \_\_\_\_\_

Address: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Phone: \_\_\_\_\_

Please attach the material submitted accompanied by information as to frequency, distribution, use or other details

**STATE CHAPTER "MEMBER OF THE YEAR & COMMISSIONER OF THE YEAR  
(CATEGORY VII):**

Name of Nominee: \_\_\_\_\_

Agency: \_\_\_\_\_

Address: \_\_\_\_\_

Category:      Member                                  Commissioner

State Chapter: \_\_\_\_\_

Certification as State chapter "Member of the Year" should be made by the Chapter President or other authorized  
Chapter Officer signing and submitting the entry form.

**THE "HORSE'S AFT" (CATEGORY VIII):**

**SWRC COMMISSIONER'S SERVICE AWARD (CATEGORY IX):**

**"EXTRA MILE" AWARD (CATEGORY X):**

Name of Nominee: \_\_\_\_\_

Agency: \_\_\_\_\_

Address: \_\_\_\_\_

Category:      \_\_\_\_\_ VIII                                  \_\_\_\_\_ IX

Please attach information describing the event(s) or actions which led to this nomination.  
Duplicate for multiple entries.

#####

Name of Person Preparing Entry: \_\_\_\_\_

Agency: \_\_\_\_\_

Address: \_\_\_\_\_

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

**All entries must be received on or before May 5, 2023.**

Covington Housing Authority/2023 Awards Competition  
P.O. Box 1293 Covington, LA 70434  
ATTN: Tammie Groover  
[tygroover@bellsouth.net](mailto:tygroover@bellsouth.net)

Please make TWO (2) copies of your submissions. One copy will be submitted to LHC, and the other copy will be submitted to SWNAHRO.