# COLLIER COUNTY BOARD OF COUNTY COMMISSIONERS REQUEST FOR PROCLAMATION

Please complete the form below and email to Proclamations@colliercountyfl.gov along with a draft of the proclamation *(Insert language on the Draft Proclamation From linked on the same webpage as this Request Form)*. **Forms must be submitted a minimum of 13 days prior to the requested meeting date.**

## Please note: A Commissioner sponsor is required!

## COMMISSIONER(S) AGREEING TO SPONSOR: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Once the Board agenda is **approved** by the Chair, staff will contact you to confirm receipt and presentation at an upcoming Board of County Commissioners meeting. If you have any questions, please email Proclamations@colliercountyfl.gov or by calling (239) 252-8075.

# NAME:

**ADDRESS:**

**PHONE:**

**EMAIL:**

**DATE OF THE COMMISSION MEETING BEING REQUESTED FOR PRESENTATION:**

**TOPIC/REASON FOR THE PROCLAMATION REQUEST:**

**DOES THIS PROCLAMATION RECOGNIZE A *SPECIFIC* CALENDAR DATE?** \_ **HAS THE PROCLAMATION BEEN PRESENTED BY THE BOARD IN PREVIOUS YEARS?**

**NAME OF THE LEAD RECIPIENT AND TITLE (IF APPLICABLE) WHO WILL BE PRESENT AND INTRODUCED AT THE MEETING TO ACCEPT THE PROCLAMATION:** *(Other attendees may also participate in the receipt of the Proclamation but will be announced by the County Manager as “distinguished guests.” Commissioners may opt to identify others, by name, in any comments they make during or after the presentation of the Proclamation.)*

 ***LEAD* RECIPIENT NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Note:** A photograph will be taken with the County Commissioners at the meeting when the proclamation is presented. Other persons present with the recipients may also come forward at the time of the photograph. Would you like a copy of this photograph sent *(circle one)*: **Via email** / **Via U.S. Mail**

Per your delivery selection, please provide a name and email address or physical mailing address *if different than already provided on the form above*:

## FOR INTERNAL USE ONLY:

DATE FORM RECEIVED: RECEIVED BY:

ACCEPTED:

DENIED:

REASON FOR DENIAL:

APPLICANT NOTIFIED ON (DATE): VIA TELEPHONE / EMAIL / US MAIL

BY: (SIGNATURE) REVISED 2/2023