



## NAIFA HALL OF FAME NOMINATION FORM

**Recognizing and honoring extraordinary service and tremendous contributions by the most accomplished, impactful, and inspirational members of the NAIFA family.**

### Recommendation

In my opinion, the following person has rendered service to NAIFA, which viewed in retrospect, is so outstanding and beyond the call of duty as to merit consideration for the NAIFA Hall of Fame.

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

BASIS FOR NOMINATION: \_\_\_\_\_

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

NOMINEE PHONE NUMBER: \_\_\_\_\_

NOMINEE EMAIL: \_\_\_\_\_

### Supporting Data

Please include with this nomination form a biographical sketch of your nominee. Such information may include a description of the nominee's service to NAIFA, professional achievements, leadership roles, other association and industry recognition, and commitment to ethical conduct. Please indicate the specific accomplishments that, in your opinion, demonstrate that your nominee deserves the award.

**Supporting data must accompany the nomination. Deadline: May 31, 2026**

NOMINATOR: \_\_\_\_\_

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

NOMINATOR PHONE: \_\_\_\_\_

NOMINATOR: EMAIL: \_\_\_\_\_

Mail this form to:  
c/o Executive Office  
National Association of Insurance and Financial Advisors  
600 State St. Ste. A  
Cedar Falls IA 50613

Or send via email to:  
[candidate@naifa.org](mailto:candidate@naifa.org)