



111 East Maple Street · P.O. Box 1019 · Independence, Missouri 64051 - 0519

www.independencemo.org · 816-325-7000

2024 SUSAN PAXTON BLOCK DISTINGUISHED PUBLIC SERVICE AWARD



AWARD TITLE:

Excellence in City Government.

QUALIFIED RECIPIENTS:

Employees, volunteers and public officials for the city government of Independence, Missouri.

AWARD:

\$1,000 from the Susan Paxton Block Memorial Fund, medallion and a pin.

CRITERIA FOR AWARD

- Achieving significant efficiency in the operation of a program or achieving significant progress.
- Innovation resulting in an improved service, customer responsiveness or cost savings.
- Service over and above what is normally expected of a job.
- Unsung hero: Exceptional quality of a program or facility.
- Development of a new program or service to address and meet a need.
- Demonstrated measurable excellence in customer service delivery.

NOMINATION PROCESS

Nominees will be submitted by City Council members, department directors or interested citizens, using the attached form developed by the Selection Committee.

SELECTION COMMITTEE

The Selection Committee shall make all decisions concerning the award, in addition to selecting the award recipient(s). Membership of the Selection Committee consists of:

1. Appointed, Active or Sustaining member, Junior Service League (Selection Committee Chairperson).
2. Chairman of the Board, Chamber of Commerce.
3. President, Young Matrons.
4. Presidents of three of the following service clubs. Membership among the service clubs will be rotated as determined by the President of the Junior Service League:

- Rotary Club of Independence
- Independence Kiwanis
- Inter-City Kiwanis Club
- Fairmount Kiwanis Club
- Optimist Club of Independence
- Independence Midtown Optimist Club
- Sertoma Club
- President, Lions Club

**2024 SUSAN PAXTON BLOCK DISTINGUISHED PUBLIC SERVICE AWARD
NOMINATION FORM**

Date _____

Nominee _____ Department _____

Home Address: _____ City _____

State _____ Zip _____ Home Phone _____ Business Phone _____

Nominee's position within the City of Independence _____

How long has your nominee been affiliated with the city government of Independence? _____

What is your relationship to the nominee? _____

Your Name _____ Title _____

Home Address _____ City _____ State ____ Zip _____

Home Phone _____ Business Phone _____

Describe your nominee's contribution to excellence in city government:

Continue on another page if more space is needed. Attach any data you wish the committee to consider.

Are you willing to appear before the committee concerning your nominee? _____

Your Signature

This nomination form should be submitted by Wednesday, August 14, to Junior Service League of Independence, 3122 South Crysler, Independence, MO 64055, Attn: Mary House