



Robert E. Fox, CLU®, AEP® Volunteer Service Award Application

TO: Board of Directors
National Association of Estate Planners & Councils
2001 Crocker Rd., Ste. 510
Westlake, OH 44145

DEADLINE
FRIDAY, MAY 8, 2026
EMAIL TO: ELEANOR@NAEPC.ORG

This application should be completed as fully and accurately as possible to assist the board in its review of those nominated to become a recipient of the Robert E. Fox, CLU®, AEP® Volunteer Service Award for 2026.

> Please take special care to review the program's [criteria and exclusions](#) prior to completing this application.

Nominee's General Information

Full Name _____

Primary Professional Discipline (choose only one, please)

- | | |
|--|---|
| <input type="checkbox"/> Academia | <input type="checkbox"/> Philanthropic Professional |
| <input type="checkbox"/> Accountant | <input type="checkbox"/> Trust Professional |
| <input type="checkbox"/> Attorney | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Insurance/Financial Planning Professional | |

Designation(s)/Degree(s) Held

- | | | | |
|-------------------------------|--------------------------------|--------------------------------|-------------------------------|
| <input type="checkbox"/> AEP® | <input type="checkbox"/> CFP® | <input type="checkbox"/> CPA | <input type="checkbox"/> CTFA |
| <input type="checkbox"/> CAP® | <input type="checkbox"/> ChFC® | <input type="checkbox"/> CPWA® | <input type="checkbox"/> JD |
| <input type="checkbox"/> CFA | <input type="checkbox"/> CLU® | <input type="checkbox"/> CSPG | <input type="checkbox"/> MSFS |
| <input type="checkbox"/> MST | | | |

Please List Other Designation and/or Degrees _____

Is this Nominee Aware of this Nomination? Yes No

Name of Estate Planning Council in Which Nominee is a Member _____

Nominee's Contact Information

Firm/Company _____

Position _____

Business Address _____

Business City, State, Zip _____

Primary Email _____

Link to Nominee's Bio _____

Description of Exceptional Service

This is a time-sensitive award. The service for which you are nominating your candidate must have occurred between **January 1, 2025, and December 31, 2025**. Please help us learn more about your nominee by providing a detailed explanation of his/her/their exceptional service. Examples of what may be considered exceptional volunteer service follow; supplemental information is welcome.

- Service to a local estate planning council, or members of such council, that reach beyond the regular duties of a volunteer executive committee, board, or committee member.
- Development or the expansion of services, education, or legislation in the fields of philanthropic planning, tax, insurance, financial planning, estate planning, probate and trust law that have an impact on estate planning and the community at large.
- Estate planning related activities within the community.
- Service to NAEPC.

Approximate date exceptional service began: _____ and ended: _____.

Nominator's Information

This application is being offered by:

____ Estate Planning Council
Council Name _____
____ Estate Planning Council Board Member

____ Estate Planning Council Staff Executive /
Administrator
____ NAEPC Board Member
____ NAEPC Staff Member

Full Name _____

Firm/Company _____

Business Street Address _____

Business City, State, Zip _____

Email _____ Phone _____

Questions

Questions about this award may be directed to:

Eleanor M. Spuhler
National Association of Estate Planners & Councils
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866-226-2224 · eleanor@naepc.org