

Texas Circulation Management Association

2009

District Manager/Distributor of the Year Award Application

Newspaper: _____

Circulation: Daily: Sunday: _____

Applicant's Name: _____

Division / District / Zone: _____

Contact Person: Phone: _____

Application Due Date: **October 15, 2008** _____

Mail completed application to: **Mike Arnold, Corpus Christ-Caller Times, PO Box 9136, Corpus Christi, TX 78469**

TO BE COMPLETED BY DISTRICT MANAGER/DISTRIBUTOR

Name: _____

Address: _____ **Phone:** _____

City: _____ **Zip Code:** _____

Date Started with Newspaper: _____

Number of newspapers you manage? **Daily:** _____ **Sunday:** _____

Average Complaint Ratio: Daily _____ **Sunday** _____

Percentage of increase since you became manager?
Daily: _____ **Sunday:** _____

Business organizations or community activities:

Accomplishments you have made at your newspaper:

Best promotion idea you developed and your results:

Describe briefly the importance of working for your newspaper:

Signature:

Date:

This application and the information contained herein becomes the property of the Texas Circulation Management Association (TCMA) once it is submitted to TCMA.

TO BE COMPLETED BY THE IMMEDIATE SUPERVISOR/MANAGER OF APPLICANT

Supervisor/Manager's Name: _____

**Describe briefly why your applicant should be selected as the TCMA District
Manager/Distributor of the Year.**

Manager's Signature

Date:

This application and the information contained herein and any subsequent videos/DVD becomes the property of the Texas Circulation Management Association (TCMA) once it is submitted to TCMA.