

ERGONOMIC SAFETY AND HEALTH AWARD

(Nomination due by October 31) (REVISED FORM)

ASABE: The Society for Engineering in Agricultural, Food and Biological Systems

NOMINATION FORM PRIVILEGED INFORMATION

This two-page form, along with the 3-5 support letters, will provide the only information used for the evaluation of your candidate. The form must be completed in 2-typewritten pages (10 pt. font or larger).

- 1 **Candidate's Name** (first name, middle initial, last name):
- 2 **Primary Employment Position and Institution/Company** (include address and telephone number):
- 3 **Date and Place of Birth** (city, state, country)
- 4 **Citizen of** (name of country, if naturalized, please give date):
- 5 **Education** (list all degrees earned, dates, fields, and institutions):
- 6 **Registered Engineer** (list states):
- 7 **Area of Specialization:**
- 8 **Specific Outstanding Technical and Professional Engineering Accomplishments and Contributions Meriting Selection of the Award** (Please limit to 200-300 words):
- 9 **Record of Professional Work Experience** (list principal positions and describe primary responsibilities for each; include dates):

10 **Contributions of Record** (list complete title and authors for only five (5) publications of most significant impact)
Summary: refereed journal articles____; patents____; books____; book chapters____; conf. proceedings____;
other publications____; other contributions of record_____.

11 **Principal Technical Society Membership** (including grades) and **Activities, and Other Noteworthy Pertinent Accomplishments in Engineering and Public Service** (boards, committees, consultant-ships, important offices held and contributions to society):

12 **Professional Recognition** (honors, awards, prizes, honorary degrees; give specifics):

13 **Proposed Citation** (include no more than 20 carefully edited words that reflect specific documented contributions):

Nominated by:

**References – List 3-5 reference names.
Each reference must submit a letter of support.**

_____	1.	_____	_____
Name		Name	Work Affiliation
_____	2.	_____	_____
Name		Name	Work Affiliation
_____	3.	_____	_____
Affiliation and telephone number		Name	Work Affiliation
_____	4.	_____	_____
Date		Name	Work Affiliation
_____	5.	_____	_____
		Name	Work Affiliation