MEMBERS CHOICE AWARD OF MERIT

*Please check only one box. Use two separate forms to submit nominations for both awards.

Candidate's Name:_____

Business Address: _____

Organization Name:_____

Candidate's Title: _____

In brief description, please answer the following question to explain why you feel this nominee is deserving of the award. What specific action has led you to believe that the nominee is deserving of the award? How did this action benefit the chapter? Are there any other contributions this person has made to the chapter) i.e. board/committee involvements) that you would like to mention?

_____

_____

_____

_____

_____

_____

_____

Nominated By:

_____

Phone Number

_____

Thank You For Your Nomination

Forms must be received by Friday May 15, 2015, please submit to

Jenean Chavey, CHME/Group Sales Manager
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