



POTOMAC SECTION of AIHA
INDUSTRIAL HYGIENIST OF THE YEAR – 2018
NOMINATION FORM

To be filled out by the individual submitting the name of a nominee for this award. Please print clearly or type.

Candidate's Name _____

Title _____

Company Organization _____

Address _____

City/State/Zip _____

Phone _____ Email _____

Briefly provide supporting information regarding the nominee (attach additional sheets if necessary):

Sponsor Name: _____ Title: _____

Address: _____

City/State/Zip _____

Phone: _____ Email: _____

As the sponsoring individual, I certify that I believe all statements above to be accurate, and a faithful reflection of the nominee's industrial hygiene activities in the Section, for an employer and in the community.

Signature _____ Signed by email _____ Date _____

Please submit to Mary Kay Snow at mksnowva919@gmail.com no later than May 15, 2018