**ACOEM Annual Awards**

**Nomination Form – 2020 Awards**

**Nomination Deadline October 1, 2019**

**The Awards Committee invites ACOEM members to submit the names of select individuals who have made significant contributions to the field of occupational and environmental medicine (OEM) to be considered for one of four ACOEM annual awards.**

**To nominate an individual for one of these awards, please complete all of the information below. Incomplete nomination forms will not be processed. Additional details can be found on the** [**ACOEM Annual Awards Page**](http://www.acoem.org/acoemannualawards.aspx)

***I would like to nominate an individual for one of the following ACOEM awards:***

**[ ]  HEALTH ACHIEVEMENT IN OCCUPATIONAL MEDICINE AWARD**. Presented to an ACOEM member for a specific, unique achievement in the field of OEM.

**[ ]** \***LIFETIME ACHIEVEMENT IN OEM AWARD**. Presented to an individual (member or non-member of ACOEM) who has had a distinguished lifetime career in one or more disciplines of occupational medicine, environmental medicine, and/or environmental health.

**[ ]  MERITORIOUS SERVICE AWARD**. Presented to an ACOEM member who has provided meritorious service to the College.

**[ ]** \***EXCELLENCE IN EDUCATION OR RESEARCH IN OEM AWARD**. Presented to an individual (member or non-member of ACOEM) for significant lifetime contributions made to academic excellence or research in the disciplines of occupational medicine, environmental medicine, and/or environmental health.

*\* Lifetime Achievement and Excellence in Education or Research awards are presented for lifetime achievement. Each may only be awarded once to an individual. To find out if an individual has already received one of these awards before submitting a nomination, access the* *[Past ACOEM Award Winners](http://www.acoem.org/uploadedFiles/About_ACOEM/ACOEM%20Award%20Winners%20thru%202017.pdf) list.*

**NOMINEE INFORMATION: *Please indicate whether the nominee is a member of ACOEM***

**[ ]  Member** *(only members are eligible nominees for the Health Achievement or Meritorious Service Awards)*

**[ ]  Non-member**

|  |  |
| --- | --- |
| *Nominee Name:*  | *Company/Organization:*  |
| *Degree:*       | *Department:*  |
| *E-mail:*  | *Address / Suite / Floor:*  |
| *Telephone:*  | *City /State:* *Country:*  |

**NOMINATION STATEMENT: *List below the detailed reasons why the individual you are nominating deserves the recognition for a particular award. Be specific about this person’s achievement and the significance/relevance of the achievement to the field of occupational and environmental medicine (if necessary, attach a separate piece of paper or document):***

**NAME OF NOMINATOR**: ***Please provide your contact information so that we may call you if further details are needed***

Nominator Name:

Telephone:  E-Mail: