

2023 NCAB AALAS Award Nomination Form



INSTRUCTIONS:

- To be eligible for an award, all portions of the application must be complete and the application submitted by **August 11th, 2023**.
- Any member of the laboratory animal science industry may recommend or support a worthy candidate.
- Complete applications should address the award criteria and include:
 - Nomination form (i.e., this form)
 - One signed letter of nomination (this is the person who will be the point of contact for questions regarding the application, championing the award nominee)
 - Two signed letters of support (most impactful are those from individuals who have seen the nominee's work and have the experience to assess the nominee against others in the field)
 - Applicant's resume (with specific skills and accomplishments supporting the award sought)
- Submit the complete application package by email to the NCAB Awards Chair: awards@ncabaalas.org

SECTION 1: AWARD TYPE

Award (Check one): Submission Date: _____ Received Date: _____

- Charles G. Durbin Award** (Animal Caretaker)
- Curtis A. Black Award** (Veterinary/Animal Health Technicians)
- Richard L. Pierson Award** (Manager or Supervisor)
- William I. Gay Award** (Trainer)
- Betty Fatzie Award** (Volunteer-Council or Committee Member)
- Joe R. Held Award** (Clinical/Facility Laboratory Animal Veterinarian)

SECTION 2: NOMINEE INFORMATION

Nominee's Name: _____

Street Address: _____ City / State / Zip: _____ / ____ / _____

Phone Number: _____ Email: _____

SECTION 3: EMPLOYMENT INFORMATION

Current Employer: _____ Years Employed: _____

Job Title: _____ Years with this title: _____

SECTION 4: EDUCATION

School Name: _____ Degree Earned: _____ Year: _____

School Name: _____ Degree Earned: _____ Year: _____

SECTION 5: CERTIFICATIONS

Check all that apply:

- ALAT Date Achieved _____
- LAT Date Achieved _____
- LATG Date Achieved _____
- CMAR Date Achieved _____
- CPIA Date Achieved _____
- ACLAM Date Achieved _____

Other Certifications:

- Type: _____
Date Achieved _____
- Type: _____
Date Achieved _____
- Type: _____
Date Achieved _____

SECTION 6 PROFESSIONAL PARTICIPATION

Check all that apply:

Organization	Number of Years	Participant	Leader	Volunteer	Presenter	Poster
<input type="checkbox"/> NCAB	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> AALAS	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> LAMA	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> LAWTE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> AVMA	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> ILAM	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Other Organization Name _____ Number of Years: _____
Type of Involvement: _____

SECTION 7 NOMINATION LETTER/LETTERS OF SUPPORT

Letters of nomination/support should be submitted by at least 3 people and should address the award qualifications as detailed in the "Award Guidelines" document.

Nomination:

Written by: _____ Title: _____ Email: _____
Phone _____ Relationship to nominee: _____ Length of time knowing nominee _____

Support 1:

Written by: _____ Title: _____ Email: _____
Phone _____ Relationship to nominee: _____ Length of time knowing nominee _____

Support 2:

Written by: _____ Title: _____ Email: _____
Phone _____ Relationship to nominee: _____ Length of time knowing nominee _____