



American Association for Health Education

# Official Nomination Form

*Sponsored by Tampax Health Education Division, Procter and Gamble*

## Award Categories

Check one:

- Agency/Public/Community     Business/Industry/Workplace     Clinical/Medical Care/Patient
- College/University     School (K-12)     Health Education Administration

**All required materials must be submitted simultaneously in one packet.  
Incomplete or incorrect submissions will be returned, as well as any  
submissions not containing the District endorsement.**

Should the space provided prove insufficient, please use additional sheets, clearly marking each item.  
You may create your own computer-generated copy of this form.

## Name and Address

Name \_\_\_\_\_ E-mail \_\_\_\_\_

Address \_\_\_\_\_

Work Phone (     ) \_\_\_\_\_ Home Phone (     ) \_\_\_\_\_

## Employment

Present Position \_\_\_\_\_

Location of Employment \_\_\_\_\_

Years in Service \_\_\_\_\_

## Supervisor Information

Name \_\_\_\_\_ Title \_\_\_\_\_

Address \_\_\_\_\_

## Educational Background

## Career History

Brief career summary listing positions, locations, and length of service:

Position	Location	Length of Service

## Professional Affiliations and Activities

(e.g., membership in professional organizations, offices held, etc.)

Organization	Office	Year

## Professional Leadership/Service to AAHE

(No more than six [6]):

- 1.
- 2.
- 3.
- 4.
- 5.
- 6.

## **Health Education Related Professional Leadership/ Service to Other Organizations Such As ASHA, APHA, etc.**

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Give dates, type of service, and level, such as state or national.

National Level:

District Level:

State Level:

Local Level:

## Contributions to the Field Criteria:

Major consideration for the award will be given to the information provided under the four (4) criteria listed. Attach one (1) double-spaced sheet for each criteria. In describing your qualifications under each criterion, specifically address innovation, major accomplishments, and significance to the field. Underline and label each criterion in capital letters. The descriptive text should begin on the next line.

1. Leadership in developing and implementing or directing/coordinating effective health education/promotion programs.
2. Volunteer service to local, state, district or national level organizations or at the school or community levels.
3. Service to local, state or national professional organizations.
4. Evidence of meritorious professional activity in at least three (3) of the following: innovative teaching, publications, presentations, funded research or programs, special projects, or other health related activities.

## Letters of Recommendation

Attach three (3) letters of recommendation from administrators/supervisors, professional colleagues and prominent officials (e.g., government officials) who are in a position to evaluate each candidate's qualifications related to the criteria for this award. AAHE Awards Committee members are not to be solicited for letters of recommendation.

## Statement of Endorsement

Attach, as second page immediately behind cover sheet, a statement of endorsement on official District letterhead. The statement should read: "\_\_\_\_\_ District endorses \_\_\_\_\_ as a candidate for the AAHE HEPY Award in the \_\_\_\_\_ Category."

## Submission

A candidate must submit their application to the District official providing the District endorsement.

Candidate must provide biographical information to be used in awards booklet should candidate be selected as a final recipient. A sample biography is attached to this form.

The District Official providing the District endorsement should send one original for each completed application to:

AAHE HEPY Awards  
AAHE  
1900 Association Drive  
Reston, VA 20191-1599

District Official:

Name

***Deadline December 1***