American Association for Health Education (AAHE)

AAHE College University Health Education Specialist Award

6.13.12

Official Nomination Form

Award Categories
(check one)

- ☐ Agency/Public/Community
- ☐ College/University
- ☐ Worksite
- ☐ School (K-12)
- ☐ Medical Care/Patient
- ☐ Health Education Administration

All required materials must be submitted electronically.
Incomplete or incorrect submissions will not be considered.

Nominator Name and Contact Information

Name E-mail

Address

Work Phone ( ) Home Phone ( )

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 or e-mail www.aaheinfo.org to download a copy.

Nominee Name and Address

Name E-mail

Address

Work Phone ( ) Home Phone ( )

Employment

Present position

Location of Employment

Years of service

Brief Job Description

Supervisor Information

Name Title

Address

Educational Background

Career History

Brief career summary listing positions, locations, and length of service. Please begin with the most recent:

Position/Location	Job Responsibilities	Length of Service

Professional Affiliations and Activities

Professional affiliations and activities (e.g., membership in professional organizations, offices held, etc.)

Organization	Activities	Year

Contributions to the Field Criteria

Major consideration for the award will be given to the information provided under the four (4) criteria listed. Following is one (1) page for each criterion, please double-space. In describing your qualifications under each criterion, specifically address innovation, major accomplishments, and significance to the field.

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 associations/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.

Attach brief biographical write-up, as per sample.

Submission

Submit all nominations to:

AAHE Awards
1900 Association Drive
Reston, VA 20191-1599

DEADLINE: October 15th – State Nominations to AAHPERD VP Programs
December 15th -- District Nominations to AAHPERD VP Programs

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 associations/ 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