



## The Pittsburgh Section of the American Chemical Society

### Distinguished Service Award

#### NOMINATION FORM

**Note:** Any individual may nominate or support *only* one nominee for this award in any given year. Please complete all fields.

#### NOMINATOR INFORMATION

|                                      |           |     |  |
|--------------------------------------|-----------|-----|--|
| First Name                           | Last Name |     |  |
| Company or Institutional Affiliation |           |     |  |
| Present Position (Exact Title)       |           |     |  |
| Address                              |           |     |  |
| City                                 | State     | Zip |  |
| Telephone                            | Fax       |     |  |
| Email                                |           |     |  |

Signature

Date

**NOMINEE INFORMATION**

|  |           |     |
|--|-----------|-----|
| First Name   | Last Name |     |
| Local Section  |           |     |
| Company or Institutional Affiliation   |           |     |
| Present Position (exact title)   |           |     |
| Address  |           |     |
| City   | State     | Zip |
| Telephone: (business)  | (home)    |     |
| Fax  | Email     |     |
| Website  |           |     |
| Has this nomination been discussed with the nominee?    Yes <input type="radio"/> No <input type="radio"/> |           |     |

**RECOMMENDATION**

In the space below or on an at attached sheet, write a narrative summary evaluating the nominee's outstanding service in advancing the Pittsburgh Sections. Explain why the nominee is being recommended for this award with reference to the stated purposes of the award.



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**Distinguished Service Award**

**SUPPORT FORM**

**Note:** An individual may nominate or support *only one* nominee for this award in any given year. Please complete all fields.

**Nominee Name:**

**SUPPORTER INFORMATION**

|                                      |                 |     |
|--------------------------------------|-----------------|-----|
| First Name _____                     | Last Name _____ |     |
| Company or Institutional Affiliation |                 |     |
| Present Position (exact title)       |                 |     |
| Address                              |                 |     |
| City                                 | State           | Zip |
| Telephone                            | Fax             |     |
| Email                                |                 |     |

**STATEMENT OF SUPPORT**

On a separate sheet, type a brief narrative summary describing how you know the nominee and the basis for your support of this nomination.

Signature

Date