



- Nominee Information	- Accomplishments, Impact, Honors	- Summary, qualifications, citation	- Resume, photo
- Letters of Recommendation	- Nominator Information	- Submitted on Behalf Of	

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## Bronze Medal Award - Confidential

**SUBMIT THIS FORM BY 1 February of the year in which the award is to be given.**

**This award serves to recognize and encourage members 35 years of age or less, many of whom have demonstrated notable interest in the Emerging Professional Achievement Award. Please note the following:**

- 1. Two years of current, continuous membership in ASM International as an individual or as the voting representative of a Chapter sustaining membership at the time of nomination.**
- 2. Candidates shall be no more than 35 years of age on January 1 of the year in which the Award is given.**
- 3. Individuals who have already been honored by a Silver Medal Award, Fellow Award or the Allan Ray Putnam Service Award shall not be eligible for nomination for the Bronze Medal Award.**

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Nominations can be submitted by any of the following:

1. Chapter through Executive Committee /span
2. Committee/Council
3. Affiliate Society
4. Awards Policy Committee
5. Awards Selection Committee
6. Five ASM Members

Nominations are to be no longer than six (6) attached pages total (in 10-point font) plus a maximum of three (3) letters of support for a total of no more than 10 attached pages maximum.

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Once the files are uploaded, you will see a screen confirming your submission and you will receive an email confirmation.

*If you do not see this screen, your submission did not go through. Please make sure each file is below 3MB and resubmit the package. If the submission does not upload and transmit properly, please contact [Christine.Hoover@asminternational.org](mailto:Christine.Hoover@asminternational.org).*

**Please be certain to furnish all relevant information: Missing data cannot be obtained elsewhere. The submitted material is the total case as it will be presented to the Awards Policy Committee. Please use additional sheets as necessary. Omissions can weaken the case of your nominee.**

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## Bronze Medal Award - Confidential

### 1. Nominee Information: \* = Required Information

\*Candidate First Name:

Candidate Middle Name/Initial:

\*Candidate Last Name:

Suffix (Dr./Prof./Jr./Sr./PE, etc.):

Business Title:

Department/Division:

Company Affiliation:

Address 1:

Address 2:

\*City:

\*State/Province:

Zip Code:

\*Country:

\*Phone Number:

\*E-Mail Address:

### 2. Date of Birth: See Rule C for age restriction.

Birth Date: (MM/DD/YYYY)

Date of Birth (required for nomination eligibility):

### 3. Two Years of ASM Membership Required:

Member ID:

### 4. Join Date:

### 5. Chapter:

Chapter

Chapter (If known):

### 6. Nature of Business: (150 words or less)

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### 7. Academic Background: (institution, major/minor, graduation year, degree/certificate)

	Institution	Major/Minor	Yr of Graduation	Degree/Certificate
Degree 1				
Degree 2				
Degree 3				
Degree 4				
Degree 5				
Degree 6				
Degree 7				
Degree 8				

### 8. Employment History:

	Company Name	Position Held	Years of Service
Employment History 1			
Employment History 2			
Employment History 3			
Employment History 4			
Employment History 5			
Employment History 6			
Employment History 7			
Employment History 8			

### 9. Technical Accomplishments in some phase of materials science, engineering, production, manufacturing, design, technology transfer, application of technology and development, research or education (e.g. accomplishments may include noteworthy publications, books, papers, patents, new materials and processes, unique innovations, etc).

[Choose File](#)

### 10. VOLUNTEER SERVICE in support of ASM International and/or the profession of materials science and engineering.

	ASM Cmte/Council/Chapter/Affiliate Society/other	ASM Office/Position Held	Years of Service	Contributions/Comments
ASM Volunteer Service 1:				
ASM Volunteer Service 2:				
ASM Volunteer Service 3:				
ASM Volunteer Service 4:				
ASM Volunteer Service 5:				
ASM Volunteer Service 6:				
ASM Volunteer Service 7:				
ASM Volunteer Service 8:				
ASM Volunteer Service 9:				

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### 11. SUMMARY: What is the nominee's most significant technical contribution and volunteer service, and the impact on society?

[Choose File](#)

### 12. IMPACT of the nominee's accomplishments on industry and/or society:

### 13. Honors and Awards, as applicable.

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## Bronze Medal Award - Confidential

### 14. Summary: What is nominee's most significant contributions or accomplishments?

[Choose File](#)

### 15. Read carefully the qualifications for this award. How does this nominee fit the listed requirements and qualifications of the Bronze Medal Award? (150 words).

### 16. **Suggested Citation** of not more than 30 words as to why the nominee should be selected. *Suggested citation should clearly define the achievement for which the nominee is to be recognized. This statement will form the basis for the official citation should the nominee be selected.*

#### ATTACH PHOTO OF NOMINEE:

Attachments are not to exceed 3MB max per file.

[Choose File](#)

No file selected

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**RECOMMENDATION LETTERS:** Please append statements/letters from at least two, but not more than three, close associates familiar with the candidate's endeavors.

*The total nomination package (i.e. nomination attachments, plus statements/letters) must not exceed ten (10) attached pages total.*

**File Upload for Supporting Letter 1:**

Attachments are not to exceed 3MB max per file.

No file selected

**File Upload for Supporting Letter 2:**

Attachments are not to exceed 3MB max per file.

No file selected

**File Upload for Supporting Letter 3:**

Attachments are not to exceed 3MB max per file.

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**17. Nominator (person submitting the nomination):** \* This is the lead nominator who ASM will communicate with as the point of reference and contact relative to this nomination.

\*Nominator ASM Member ID: \*Nominator First Name: Nominator Middle Name/Initial: \*Nominator Last Name: Suffix (Dr./Prof./Jr./Sr./PE, etc.): Title: Department/Division: Company Affiliation: Address 1: Address 2: City: State/Province: Zip Code: Country: \*Phone Number: \*Nominator E-Mail Address: [Save and Finish Later](#)

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5. Awards Selection Committee
6. Five ASM Members

### 18. This nomination is submitted on behalf of the:

	Chapter	Committee/Council	Affiliate Society	Award Selection or Awards Policy Committee	Five ASM Members in good standing
Nomination Submitted on behalf of:	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>

### 19. If Submitted by ASM Fellow (FASM) OR Five ASM Members, please provide each ASM Member's name and Membership Number below:

	ASM Member Name:	ASM Member Number:
ASM Member 1	<input type="text"/>	<input type="text"/>
ASM Member 2	<input type="text"/>	<input type="text"/>
ASM Member 3	<input type="text"/>	<input type="text"/>
ASM Member 4	<input type="text"/>	<input type="text"/>
ASM Member 5	<input type="text"/>	<input type="text"/>

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**Complete nomination is to be no more than a total of 10 attached pages (in 10 pt. font size). The nomination form pages are not included in this total of 10 pages.**

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