



Honorary Member Nomination - Confidential

SUBMIT THIS FORM BY 1 February one year prior to that in which the award is to be given to:

Chair, Award Selection Committee ASM International 9639 Kinsman Road Materials Park, OH 44073-0002

Criteria:

*ASM Past Presidents are eligible for this award five years after having completed their term as ASM President.

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.

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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You will also receive an email confirmation. If you do not receive the email confirmation, please contact Christine Hoov receive the email confirmation and the second sec



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1. Nominee Information: * = Required Inform	ation
Prefix (Dr./Prof./Ms./Mr./etc.):	
*Candidate First Name:	
Candidate Middle Name/Initial:	
*Candidate Last Name:	
Suffix (Sr./Jr./PE/etc.)	
Business Title:	
Department/Division:	
Company Affiliation:	
Address 1:	
Address 2:	
*City:	
*State/Province:	
Zip Code	
*Country:	
Phone Number:	
E-Mail Address:	
2. ASM Membership Status:	A Nominee an ASM Member?
Is the nominee an ASM Member?	
3. ASM Member ID if applicable or known:	
Member Number (if applicable/or known)	
4. Total Years of ASM Membership (if applicable):	
5. Chapter (if applicable):	
Chapter:	Chapter
6. Nature of Business: (150 v/ords or less)	
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Degree 1 Degree 2 Degree 3 Degree 4 Degree 5 Degree 6 Degree 7 Degree 8 8. Employment History: Employment History 1 Employment History 2 Employment History 3 Employment History 4 Employment History 5 Employment History 6		Institution Company Name	Position Position	Yr of Graduation	Degree/Certificate Years of Service
Degree 2 Degree 3 Degree 4 Degree 5 Degree 6 Degree 7 Degree 8 8. Employment History: Employment History 1 Employment History 2 Employment History 3 Employment History 4 Employment History 5		Company Name	Position	n Held	Years of Service
Degree 3 Degree 4 Degree 5 Degree 6 Degree 7 Degree 8 8. Employment History: Employment History 1 Employment History 2 Employment History 3 Employment History 4 Employment History 5		Company Name	Position	n Held	Years of Service
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10. Industrial, government specialization; accomplish	ments:	ing experience;	duties; responsibilit	ties; areas of ende	eavor and
Choose File No file selected	AM				
11. Achievements - (e.g. books, documentation as necessary, how	papers, patents, new wever, do not attac	w materials and pro h coples of papers -	cesses, unique innovatio a listing is sufficient!	ns). You may upload a	additional
Choose File No file selected					
12. Honors: Please be cognizar	nt of document size	e and number of pa	ges provided.		
Choose File No file selected					



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13. Summary: What is nominee's most significant contribution or accomplishment?	
Choose File No file selected	
14. Read carefully the qualifications for this award. Why does nominiee fit the requirements?	
Choose File No file selected	
15. Suggested citation of not more than thirty (30) words.	
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AMPLE	



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RECOMMENDATION LETTERS:

Append statements of at least three (3) close associates familiar with the candidate's endeavors.	
16. File Upload for Supporting Letter 1: Attachments are not to exceed 3MB max per file.	
Choose File No file selected	
17. File Upload for Supporting Letter 2: Attachments are not to exceed 3MB max per file.	
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18. File Upload for Supporting Letter 3: Attachments are not to exceed 3MB max per file.	
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19. File Upload for Supporting Letter 4: Attachments are not to exceed 3MB max per file.	
Choose File No file selected	
20. File Upload for Supporting Letter 5: Attachments are not to exceed 3MB max per file.	
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21. ATTACH PHOTO OF NOMINEE: Attachments are not to exceed 3MB max per file	
Choose File No file selected	

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Note: Nominations can be submitted by any of the following: Chapter, Committee, Council, Affiliate Society, the Awards Policy Committee, an Awards Selection Committee, or Five ASM Members. A single nomination can be submitted jointly if desired, however, only one nominating group from the list below is necessary.

22. This nomination is submitted on behalf of the:						
Note: Nominations can be submitted on behalf of mother the nomination.	ore than one volunte	eer group, but that i	s not required. A <u>m</u>	<u>iinimum</u> of one gro	oup must submit	
	Chapter	Comittee/Council	Affiliate Society	Award Selection or Awards Policy Committee	Five ASM Members in good standing	
Nomination Submitted on behalf of:	▼	•	•	•		
23. If Submitted by Five ASM Members, please p	rovide each ASM I	Member's Name a	nd Membership N	umber below:		
ASM Member 1	ASM Me	ember Number:		ASM Member Name:		
				1		
ASM Member 2 ASM Member 3				4		
ASM Member 4				•		
ASM Member 5						
Administration 3						
24. Nominator (person submitting the nomination reference and contact relative to this nomination	on): * This is the <u>l</u> 1.	ead nominator w'	o ASM will commu	ınicate with as th	e point of	
*ASM Member ID:		V				
Prefix (Dr./Prof./Ms./Mr./etc.):		WILL				
*Nominator First Name:						
Nominator Middle Name/Initial:	•					
*Nominator Last Name:						
Suffix (Sr./Jr./PE/etc.)	\sim					
Title:						
Department/Division:	, X					
Company Affiliation:	V /					
Company Affiliation: Address 1: Address 2: *City: *State/Province: Zip Code *Country:						
Address 2:	<u> </u>					
*City:						
*State/Province:						
Zip Code						
*Country:						
*Phone Number:						
*Nominator E-Mail Address:						

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