



TSS President's Award for Meritorious Service



CONFIDENTIAL NOMINATION FORM Page 1

RETURN THIS FORM BY 30 SEPTEMBER
(of the year prior to that in which the award is to be given)

TO: ASM Thermal Spray Society President
or
ASM Thermal Spray Society
Chairman, Award Selection Committee
ASM International
9639 Kinsman Road
Materials Park, Ohio 44073-0002

FOR OFFICE USE ONLY

Years eligible _____ Year joined _____

Nominated by:

☐ ASM Member ☐ ASM/TSS Member

☐ ASM/TSS Committee or Subcommittee

COMMITTEE NAME

Acknowledged: _____

DATE

PLEASE TYPE

1. Name of Candidate:

FIRST NAME

MIDDLE

LAST NAME

2. Home:

ADDRESS

CITY

STATE

ZIP +FOUR

PHONE

FAX

E-MAIL

INTERNET / WORLD-WIDE WEB

3. Business:

COMPANY

TITLE

ADDRESS 1

ADDRESS 2

CITY

STATE

ZIP +FOUR

PHONE

FAX

E-MAIL

INTERNET / WORLD-WIDE WEB

4. Personal:

ASM MEMBER #

MEMBER YEARS

BIRTH DATE

ASM CHAPTER

TSS AFFILIATION

TSS Presidents Award for Meritorious Service

CONFIDENTIAL NOMINATION FORM Page 2 of 2

NOTE: ADDITIONAL SHEETS OF PAPER MAY BE ATTACHED TO ADEQUATELY SUPPORT
THE CANDIDATE'S ACCOMPLISHMENTS.

I:\Workgrps\Affiliate Societies\TSS\Awards\President's Award for Meritorious Service\Meritorious Service Nom form_2022.docx\12/8/2022

5. Academic Background (list Institution, Major/Minor, Year of Graduation and Degree/Certificate):

6. Employment History (list company Name, Position and Year):

7. Outline the candidate's service activities within the TSS including the dates of the activity and the impact on TSS membership.

Submitted by: _____
(Signature)

(Print name)

(Nominator's TSS Member Number)

Address: (for nomination acknowledgment purposes)

