

ACMA Hall of Fame Award Nomination Form

Nominees for ACMA's Hall of Fame Award must have attained distinction among his/her peers through their efforts, involvement and accomplishments in the composites industry. We appreciate you taking the time to complete this nomination form.

Nominee Data

Name: _____
 Position in Company: _____
 Company: _____
 Street Address: _____ City: _____
 State/Province: _____ Zip/Postal Code _____ Country: _____
 Phone: _____ Fax: _____ Email: _____

Work History

A. Please list the nominee's work history.

Company #1 _____	Years Employed _____	Title _____
Company #2 _____	Years Employed _____	Title _____
Company #3 _____	Years Employed _____	Title _____
Company #4 _____	Years Employed _____	Title _____
Company #5 _____	Years Employed _____	Title _____

B. Please describe the nominee's experience within the industry. Experience should include performance at each company.

C. Please describe the nominee's role in helping to advance the composites industry.



[Type text]

D. Please describe the nominee's reputation among co-workers and peers.

Inventions/Patents

A. Please describe the nominee's involvement with any processes and/or products that advanced composites. (May include developing solutions to tough technical problems).

B. Please describe any patents that the nominee may have been involved with.

Technical Innovation

A. Please describe the nominee's leadership role in advancing composite technology or moving composites into new applications.

Technical Contribution to the Industry

A. Please describe the nominee's involvement with conference papers and/or technical articles.

B. Please describe the nominee's involvement with mentoring and/or education of others within the industry.

ACMA Contribution & Service

A. Please describe the nominee's involvement with the ACMA Board of Directors, ACMA Committees or Composites Growth Initiative Committees.

[Type text]

B. Please describe the nominee's involvement with ACMA's regulatory and legislative programs. (Lobby Day, grassroots involvement etc.)

C. Please describe the nominee's involvement with ACMA's conventions and/or other ACMA services

Involvement with other Associations

A. Please describe the nominee's involvement with other associations such as SPI, SIRC, and NMMA.

Education

A. Please list the nominee's base education.

B. Please list the nominee's continuous education.

C. Please describe the nominee's training of others.

[Type text]

Community Service

A. Please describe the nominee’s service outside the composites industry. (May include mentoring/training and volunteer services).

Other

A. Please list anything else that the Awards Committee should be aware of while considering this nominee.

Nominator Information

Name: _____
Position in Company: _____
Company: _____
Street Address: _____ City: _____
State/Province: _____ Zip/Postal Code _____ Country: _____
Phone: _____ Fax: _____ Email: _____

Years the Nominator has know the Nominee: _____
Relation between Nominator and Nominee: _____

3 WAYS TO SUBMIT YOUR NOMINATION

Fax: 703-525-0743 | **Email:** membership@acmanet.org | **Mail:** ACMA, 3033 Wilson Blvd., Ste. 420, Arlington, VA 22201