



VIRGINIA ENVIRONMENTAL HEALTH ASSOCIATION

A. Clarke Slaymaker Award

NOMINATION FORM

Date of Submission: _____

Name of Candidate: _____

Job Title: _____

Work Location: _____

Address: _____

Email Address: _____

Telephone Number: _____

Nominated By: (Two signatures minimum)

Name/Title: _____

Tel. Number: _____

Email Address: _____

VEHA Member: YES or No

Name/Title: _____

Tel. Number: _____

Email Address: _____

VEHA Member: YES or No



To be eligible for the A. Clarke Slaymaker Award, a nominee must:

1. NOT be employed as an Environmental Health Professional
2. NOT be actively engaged in the field of environmental health but has provided outstanding support to the profession of Environmental Health, and the EH programs in the Commonwealth of Virginia

Nominations:

1. Candidates must be nominated by a VEHA member, or members, in good standing

Briefly describe the contributions this candidate has made toward advancing the Environmental Health Profession. Please attach any additional information you deem necessary. The Awards Committee may contact you for additional information. Provide your comments below:

Please submit electronically to board@virginiaeha.org
 Subject line: EH Professional of the Year