

“Outstanding Associate Member” Testimonial Form

Background:

For each Fall Conference, the CA-NV Section AWWA MAC solicits, from Section members, one – page testimonials of outstanding, specific, service events rendered by Associate members. These testimonials will be reviewed by the MAC and an awardee will be selected.

The intent is to recognize a specific service event which has occurred since the last Conference. Please state the time period in which this service event has occurred and the outstanding nature of the service rendered

Date: _____

Submitted by:

Name: _____

Title and Organization: _____

Address: _____

Phone, Fax, and E-mail address: _____

Outstanding Associate Member Candidate:

Name: _____

Title and Organization: _____

Address: _____

Phone, Fax, and E-mail address: _____

Testimonial of the Candidate’s Specific Outstanding Service Action