

Indiana Environmental Health Association
Award Application

Harry E. Werkowski Outstanding Chapter Award

Name of Chapter Name: _____

Chapter Officers:

(last year) President: _____ Vice President: _____

Secretary: _____ Treasurer: _____

Executive Board Representative: _____

(this year) President: _____ Vice President: _____

Secretary: _____ Treasurer: _____

Executive Board Representative: _____

List County/Businesses and/or representatives of academia that **actively** participate in Chapter Activities:

County/Business	Number of Members

Academia	Number of Members

List dates of Chapter meetings and include number of members from list above

Date of Chapter meeting	Number of Members	Number of Guests

The deadline for submitting all nominations is July 15th
Answer only the questions given. Provide information for the award year only: July 1st to June 30th.

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Describe three (3) of the Chapter's most outstanding (*definition: having or showing ability well above average*) achievements made to strengthen and improve the quality of the Association through participation and commitment including dates and number of members involved.

1. _____

2. _____

3. _____

Percent of Chapter members at the most recent IEHA Conferences:

Spring Conference: _____ %

Fall Conference: _____ %

Chapter involvement with other Chapters: _____

Issue(s) and Article title(s) published in the Journal by Chapter members:

Person submitting this application:

Name: _____ Telephone: _____

Address: _____ City: _____ St: ___ Zip: _____

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