



Harvey W. Wiley Award Nominating Form

TO: Chair, Harvey W. Wiley Award Committee
AOAC INTERNATIONAL
481 N. Frederick Avenue, Suite 500
Gaithersburg, MD 20877-2417

I hereby submit to you the following nomination for the Harvey W. Wiley Award. When more space is needed, I have attached extra sheets with the requested information. I have also attached a biographical sketch of the candidate.

1. Name of Candidate: _____
(FIRST) (MIDDLE) (LAST)

2. Home Address: _____
(STREET ADDRESS)

(CITY) (STATE/PROVINCE) (ZIP/POSTAL CODE) (COUNTRY)

(PHONE) (FAX) (E-MAIL)

3. Business Address: _____
(AGENCY OR FIRM)

(STREET ADDRESS)

(CITY) (STATE/PROVINCE) (ZIP/POSTAL CODE) (COUNTRY)

(PHONE) (FAX) (E-MAIL)

4. Present Position: (Brief description of job, duties, and responsibilities.)

5. College Education:

<u>College or University</u>	<u>Degree</u>	<u>Graduation Date</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

6. Professional Career: (Describe briefly, yet thoroughly, in chronological order places and nature of work and major accomplishments.)

7. Memberships in Professional and Nonprofessional Societies, Clubs and Other Organizations:

8. Honors Received for Professional Work:

9. Concise description of contributions and work toward analytical methodology in areas of interest to the Association to be considered for the Award: (Include nature, purpose, and results of candidate's work. (Contributions are not restricted to those given to the Association.)

10. Appraisal of candidate's contribution to the advancement of analytical methodology: (Appraisal should spotlight and evaluate contribution of particular significance, and should add to information already given.)

11. Publications by title and reference: (Include patents, if any)

(Attach additional sheets, if needed, for any item)

Submitted by:

 (SIGNATURE) (DATE)

 (NAME, TYPE OR PRINT)

Address to be used for correspondence:

 (AGENCY OR FIRM)

 (STREET ADDRESS)

 (CITY) (STATE/PROVINCE) (ZIP/POSTAL CODE) (COUNTRY)

 (PHONE) (FAX) (E-MAIL)

For AOAC office use only:	Date Received:	Eligibility Renewal Date:
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