



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.

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. **Education:**

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

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. Peer reviewed publications, books and patents: (Restricted to ones of most relevance to question #9 above).

(Attach a curriculum vitae for the candidate. Also attach additional sheets, if needed, for any of the above items)

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: