

REGIONAL SERVICE AWARD

REGION AWARD

This **REGIONAL AWARD** shall be given in recognition of exceptional service to the society of a non-technical nature for having significantly furthered the purpose for which the society was founded, having continued over a minimum of five years in various programs and activities at the regional level.

QUALIFICATIONS

A candidate shall be a Member or Associate in good standing of IESNA and shall have provided continuous service at the regional level for a minimum of five (5) years.

PROCEDURE

1. All nomination forms must be submitted completely filled out to the Regional Vice President, Regional Awards Chairman, or Regional Executive Committee. Forms are available from the IESNA office and Section 5-31– 5-32 of this Guide.
2. Nomination forms should be accompanied by at least two letters from individuals active at the Regional Level supporting the nomination and detailing the candidate's accomplishments relative to the award.
3. The Regional Awards Committee, appointed by the Regional Executive Committee, shall have at least five (5) members consisting of Past Regional Vice Presidents (if and when available), previous award recipients, and other individuals active at the Regional Level.

THE AWARD

The award is an engraved plaque. These awards shall be presented at the region's discretion at the Regional Conference. The cost of this award is the Region's responsibility.

IESNA - REGIONAL SERVICE AWARD FORM

Date proposed: _____ Region Name _____

Use additional sheets if necessary. *Please type or print clearly.*

1. Candidate's Personal Data

Name _____
Employer _____
Address _____
City/State/Zip Code _____
Telephone (H) _____ (O) _____
IESNA Member Number _____ IESNA Section _____

2. IESNA Regional Offices Held

3. IESNA Regional Committees Served

4. IESNA Regional Administrative Contributions

5. IESNA Regional Courses/Workshops Prepared, Conducted or Instructed

6. Other Pertinent IESNA Regional Service or Activities

7. Remarks by Chief Proposer

8. Letters from the following additional proposers are attached (two required)

- a. _____
- b. _____
- c. _____ (optional)
- d. _____ (optional)

9. Approvals

I hereby approve the nomination of the candidate to receive the Regional Service Award.

Signature of Regional Awards Committee Chairperson _____
Date: _____

I hereby approve the nomination of the candidate to receive the Regional Service Award

Signature of Regional Vice President (RVP) _____
Date _____

