



The premier organization for public sector benefits professionals...

State and Local Government Benefits Association 2012 Associate Member of the Year Award

Criteria: 1) Associate Member in good standing; 2) SALGBA member for at least three years; 3) Must have attended at least three SALGBA national conferences; 4) Full-time employee with direct responsibilities working with state & local government benefits professionals.

Nominee's Name: _____ Title: _____

Entity: _____

Address: _____

City/State/Zip Code: _____

Email: _____

Is nominee a current member of SALGBA? () Yes () No

Is nominee's organization a current member of SALGBA? () Yes () No

Nominee's employer is (check one):

- () Local Government () Educational Entity () Health Insurance
- () State Entity () Pharmaceutical Company () Consultant
- () Dental/Vision () Software Management
- () Other _____

Name/Title of person making nomination: _____

Signature of person making nomination: _____

Entity of person making nomination: _____

DEADLINE for Official Nomination Form to be received: January 15, 2012

Mail, E-Mail or fax to:
Tina Bowling, Executive Director
PO Box 867, Berea, KY 40403
Fax: 859-623-8694
E-Mail: tina.bowling@salgba.com

Section I-Professional/Career Experience

Include professional history and a brief current job description. Also list three major professional accomplishments of which the nominee is most proud.

Section II-Benefits Profession -SALGBA

Include benefits profession and community service, activities pertaining to the industry, awards, certification and continuing education.

- a.) **SALGBA Service:** List in order each board and/or committee position held and give dates of service. This section should include awards and recognition received from SALGBA.

- b.) **Published Articles:** List articles which the candidate has authored, mentioned or been featured in. Include publication and date and whether it is industry or non-industry and whether it was paid or non-paid.

- c.) **Public Speaking Engagements:** List by topic, date and identify audience. Note whether developer/instructor, speaker, panelist, discussion leader or moderator. Also note whether it is industry or non-industry and paid or non-paid.

- d.) **Awards/Professional Recognition and Significance:** List awards and professional recognition, dates, name of organization and significance given by:

- 1.) The benefits profession
- 2.) Civic organization
- 3.) Employing organization

- e.) **Certification/Continuing Professional Education**

- 1.) _____ CGBA _____ CEBS
 Other _____
- 2.) List by date, attendance at SALGBA National Conferences.

- f.) **Attach Letter(s) of recommendation.**