



OHIO SECTION AWWA

JOHN J. SADZEWICZ AWARD NOMINATION FORM

(Form Must Be Typed)

Deadline for submission: June 30, 2010

Return completed form to:

Steve Heimlich

440-933-3229 voice

440-933-3854 fax

sheimlichalum@gmail.com

1. NOMINEE: (Fill-in form)

Full Name	
Current Title	
Street Address	
City, State, Zip	
Telephone	() - Ext.
FAX	() -
E-Mail	

Utility Name	
Street Address	
City, State, Zip	
Telephone	() - Ext.
FAX	() -

AMERICAN WATER WORKS ASSOCIATION

2. ELIGIBILITY

The award gives recognition to individual achievements within the water industry for contributions to public health, encouraging the use of proven new technologies, and promoting sound operational approaches in meeting regulatory requirements and ensuring safe, potable drinking water for the citizens of Ohio. To be eligible, the nominee's career must exemplify contributions in one or more of the following:

Please mark an X in the area(s) of the nominee's accomplishments.

(Click on box for X)

a.	Ohio Section AWWA member.	<input type="checkbox"/>
b.	Demonstrates proactive practices and undertakes process improvements and modifications related to drinking water.	<input type="checkbox"/>
c.	Makes outstanding accomplishments in the area of research or technological innovations for addressing drinking water issues.	<input type="checkbox"/>
d.	Demonstrates a leadership role in setting new standards for achieving regulatory compliance.	<input type="checkbox"/>
e.	Establishes drinking water policies, procedures and improvements with proven science and technology.	<input type="checkbox"/>
f.	Develops and supports innovative, practical and effective solutions for the drinking water industry.	<input type="checkbox"/>
g.	Supports, promotes and participates in education for the public and drinking water profession.	<input type="checkbox"/>
h.	Outstanding accomplishment and service in the field of water industry training and/or education.	<input type="checkbox"/>

3. JUSTIFICATION: (Fill-in form)

**Please note the nominee's accomplishments that are deserving of this Award.
(Information must be typed. Add more pages if needed.)**

4. BIOGRAPHICAL DATA: (Fill-in form)

(Information must be typed. Add more pages if needed.)

A. Brief employment history:

B. Civic organization memberships (Lions, Kiwanis, school board, etc.):

C. Year joined AWWA

D. Offices held (indicate whether District, Section, or Association level):

E. Professional organization memberships: (In addition to AWWA)

F. Professional awards or honors received: (Give the year and identify the awarding organization.)

G. College(s) attended:

Degree Earned:

Year:

<u>College(s) attended:</u>	<u>Degree Earned:</u>	<u>Year:</u>
Ohio College of Applied Science	Associate of Science	

H. Certification(s) Received: (Fill-in form)

CERTIFICATION	STATE	CERTIFICATION NUMBER

4. BIOGRAPHICAL DATA (cont'd.): (Fill-in form)

(Information must be typed. Add more pages if needed.)

I. Published articles: (Give title and publication of the article.)

5. CITATION: (Fill-in form)

Please provide a citation of 25 words or less. This citation is your recommended wording to be placed on the Award plaque.

6. NOMINATION SUBMITTED BY: (Fill-in form)

Full Name	
Current Title	
Street Address	
City, State, Zip	
Telephone	() - Ext.
FAX	() -
E-Mail	
Submission Date	

7. LOCAL NEWSPAPER(S): (Fill-in form)

Name	Will forward later.
Editor's Name	
Street Address	
City, State, Zip	
Telephone	() - Ext.
FAX	() -
E-Mail	
Website	

 Following Reserved For Committee Chair

Received By	
Date Received	