



Excellence in Risk Management Award
Nomination Form

Name of Nominee: _____

City / Entity: _____

How long has the nominee been responsible for risk management? _____

Please describe any risk management related certifications that the nominee has.

Describe why this person / program / member is being nominated. Be specific in what has been done to reduce risk exposures or the overall impact to your entity's risk management efforts.

Contact Information of Nominator:

(Name, Email, Phone)

A completed nomination form and a letter of recommendation is required to be submitted in order for the application to be considered. Please include copies of any relevant documents pertaining to the nomination, including a copy of policies / procedures created or a copy of an inspection procedure. Please email all supporting documentation and the letter of recommendation to Halie Gallik (hgallik@PEpartners.org).

THE DEADLINE FOR SUBMISSION OF OFFICIAL NOMINATION FORMS IS Friday, July 26, 2019