



# ASCP Member Excellence in Management Award Nomination Form

**Part A. Background Information** *Nominee must be a Member of ASCP actively engaged in laboratory management/supervision.*

Name of Nominee: \_\_\_\_\_

ASCP ID # (if available): \_\_\_\_\_

Title: \_\_\_\_\_

Education: \_\_\_\_\_

Certification Category(ies): \_\_\_\_\_

Work History

Current: \_\_\_\_\_

Past: \_\_\_\_\_

The information requested below is extremely important to the recipient selection process.

**Part B. 2-3 Letters of Support** (from a pathologist, laboratory administrator or manager, immediate supervisor, student, graduate, faculty member, or peer) should include:

1. Examples of the use of effective leadership skills in laboratory management
2. Examples of the use of effective management strategies in laboratory personnel, finance and/or operations.
3. Examples of contributions to laboratory quality improvement.
4. Description of demonstrated professionalism and service as a mentor to his/her students and peers within the laboratory profession.

**Part C. Additional Information should include:**

1. ASCP and ASCP Member activities.
2. Nominee's services to the community.
3. How the nominee has enhanced the image of laboratory medicine.
4. Awards and/or formal recognition in the field of laboratory medicine.
5. *Curriculum Vitae (CV.)* Submit a CV which details publications, teaching activities, workshops, presentations, and continuing education. If a CV is not available, please list examples of each on a separate sheet.

Nominator Name:  
*(your name)* \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Phone Number: \_\_\_\_\_

E-mail: \_\_\_\_\_

**Return this nomination form, letters of support  
and any additional information to:**

ASCP Awards Chair  
c/o Lucy Beck, ASCP  
33 West Monroe St., Suite 1600  
Chicago, IL 60603  
E-mail: [lucy.beck@ascp.org](mailto:lucy.beck@ascp.org)  
Fax: 312.541.4767

*For consideration for a 2010 award,  
please submit by **March 12, 2010***