



ASCP Master Award  
Nomination Form

The Master Award honors those distinguished ASCP members who have made significant contributions to the field of pathology and laboratory medicine and to the ASCP. Those individuals to be considered for the award must have been a Fellow or Member in good standing for at least 10 years.

Please complete the information below:

**Part A. Background information**

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

Title \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_  
City State Zip

**Part B. A letter nominating the individual, plus two letters of support for the nomination, must be included with the submission. The letter of nomination should contain:**

1. Examples of the nominee's outstanding commitment to the profession through contributions to the advancement of the profession.
2. Demonstrated participation in leadership roles and support of the ASCP mission.
3. Instances where the nominee has been a source of inspiration to those with whom he/she has inter-related and how his/her activities have benefited the community at large.

**Part C. Please submit a copy of the nominee's curriculum vitae.**

Nominator's Name \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_  
City State Zip

Phone Number \_\_\_\_\_ Email \_\_\_\_\_

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Note: Current members of the ASCP Board of Directors, Board of Registry Board of Governors, and/or members of the ASCP Awards Committee are not eligible for this nomination. Individuals may not self-nominate nor be involved in the nomination process.

Return this nomination form, letter of support, and any additional information by May 1, 2008 to:  
ASCP Awards Chair, ASCP, 33 West Monroe, Suite 1600, Chicago, IL 60603. Phone: 312-541-  
4951. Email: [eos@ascp.org](mailto:eos@ascp.org).