

**TSPMA PIONEER AWARD
NOMINATION FORM**

Nominee's Name _____ Date _____

Nominated by: _____

INFORMATION ABOUT NOMINEE

1. Does the Nominee meet ALL the criteria for nomination and election to receive the TSPMA Pioneer Award? _____
2. School system(s) this Nominee has served
Number of years at each: From: _____ To: _____
From: _____ To: _____
3. Was the Nominee President of TSPMA? If yes, what year served? _____
4. Was the Nominee President of NSPMA? If yes, what year served? _____
5. Did the Nominee serve on Board of Directors of TSPMA? _____/yrs. _____
Did the Nominee serve on Board of Directors of NSPMA? _____/yrs. _____
6. What other awards or honors has this Nominee received?
 - Lifetime member of TSPMA? _____
 - Lifetime member of NSPMA? _____
 - Plant Manager of the Year from TSPMA? _____ Year _____
 - Plant Manager of the Year from NSPMA? _____ Year _____
 - Pat Cochrane Leadership Award from NSPMA? _____ Year _____
7. Has Nominee received any other awards or recognitions? _____
Please list what they are and year (if known).

8. Name of spouse of Nominee: _____ Years Married _____
Name of children: _____
Name of grandchildren: _____

NOMINATION DUE JANUARY 31st; GIVEN AT JUNE CONFERENCE

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