**Nomination Form for AMC Southeastern Mass. Chapter**

**Yearly *Distinguished Service Award* (*DSA*)**

**DSA Nominee Criteria**

* Must be a current AMC SEM member and have belonged to the SEM chapter for at least five years (to be verified by AMC Membership)
* Has contributed to the SEM Chapter “above and beyond” the high level of volunteer service typically provided by our activity leaders and other members
* Contributions can be at the Board level, Committee level, across multiple committees, or in some other chapter-wide capacity
* Nominee should be actively contributing to the chapter or have contributed significantly in the past
* [Prior DSA recipients](http://www.amcsem.org/about.dsa.plaque.pdf) are not eligible for nomination

Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name(s) of person completing this form \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of nominee \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. To the best of your knowledge, is the nominee a current member of AMC SEM and has he or she been active for at least five years? (to be verified by AMC Membership) Yes\_\_\_ No\_\_\_

Is the nominee currently actively contributing to the Chapter?

Yes\_\_\_ No\_\_\_

1. Describe how the nominee has contributed to the SEM Chapter “above and beyond” the usual SEM high level of volunteer service (May include: Executive Committee positions held, workshop presentations, number/ description of trips led, support/ organization provided for Chapter events). Please provide as much detail as possible.

1. Additional comments?

After completing this form, please email to the DSA Coordinator by October 1st. All nominations are confidential.

Revised by Paul Brookes 7/17/23; Year removed by CHL 8/29/23; edits by CHL 9/2/23