

CLASS OF 2027 AWS FELLOW APPLICATION FORM

| Date | Name of Candidate | | | | |
|---|-------------------------|------------|---------|-------|--|
| AWS Member Number | Years of AWS Membership | | | | |
| Home Address | | | | | |
| | | | | one | |
| Email | | | | | |
| Present Company/ Institution Affiliation | | | | | |
| Title/Position | | | | | |
| | | | | | |
| | | | | e | |
| Academic Background | , As Applicable | | | | |
| Institution | | | | | |
| Major/Minor | | | | | |
| Degree/Certification/Y | | | | | |
| | | | | | |
| Significant Work Expe | | | <u></u> | _ | |
| Company/City/State | | | | | |
| Position | | | | | |
| Company/City/State _ | | | | | |
| Position | | | | Years | |
| Summarize Major Con | tributions in these | Positions: | | | |

IT IS MANDATORY THAT A CITATION (50 TO 100 WORDS, USE SEPARATE SHEET) INDICATING WHY THE NOMINEE SHOULD BE SELECTED AS AN AWS FELLOW ACCOMPANY NOMINATION PACKAGE. IF NOMINEE IS SELECTED, THIS STATEMENT MAY BE INCORPORATED WITHIN THE CITATION CERTIFICATE.

| SUBMITTED BY PROPOSER | AWS Member No. |
|--|---|
| PRINT NAME | |
| nominating form, or supporting letters from each | ection Committee requires further information. Signatures on this h nominator, are required from four AWS members in addition to otocopying the original and transmitting to each nominating tal package should be submitted. |
| NOMINATING MEMBER | Print name |
| AWS Member Number | |
| NOMINATING MEMBER | D |
| AWS Member | |
| NOMINATING MEMBER | |
| AWS Member Number | |
| NOMINATING MEMBER | Print name |
| AWS Member Number | |
| | |

SUBMISSION DEADLINE JULY 1, 2026

Return completed Fellow nomination package to:

Chelsea Steel Program Manager | Executive Office 8669 NW 36th Street, # 130 Miami, FL 33166

Email: nationalawards@aws.org
Telephone: 786-937-9545