



THE ALPHA ETA SOCIETY
President's Award for Excellence in Chapter Activities
NOMINATION FORM

Name of Chapter to be Nominated: _____

Name of Chapter President: _____

Name of Academic Unit Dean/Director: _____

Chapter Address: _____

Reasons for Nomination: (Successes of a Chapter and/or its membership)

- Membership Recruitment
- Activities, Achievements and Outcomes
- Scholarship
- Leadership
- Service
- Other Contributions to the Allied Health Professions

Description of the Activities/Strategies Used to Achieve the Above Described Accomplishments

Nominated by: _____

Relationship to Nominated Chapter: _____

NOMINATIONS MUST BE EMAILED BY AUGUST 1, 2018 AND SENT TO:

swilson@nova.edu