

John Lanigan Safety Professional of the Year Award

Recognition by Chesapeake Region Safety Council for the Individual who has obtained outstanding safety record for their organization or achievement within the safety profession.

Award:

Recognition will be considered for the following: (Please attach a separate page describing any or all of the following)

- **Demonstrated Knowledge and Expertise:** Demonstrated technical expertise in the broad field of safety and a thorough knowledge of the operational aspects of his/her safety employment.
- **Operational Aspect:** Candidate's ability to work within a company structure, provide a safe working environment and develop effective safety programs. Include the impact that they have had on reduction of accidents.
- **Public/Community Services:** Describe the candidate's involvement in the community and contributions that have been made during the time of service. Public/community service includes serving on community or state public safety service boards or advisory committees.
- **Codes, Standards, Legislation:** Membership on standards, codes or legislative committees at the local, state and national level. Should show any significant impact by the candidate on the safety profession on standards, legislation, or codes.
- **Leadership/Management:** Describe the candidate's ability to motivate others in the safety and health profession as well as Council's and community programs. This motivational skill is shown by significant results, achievement, or areas of responsibilities and accomplishments.

Nominations shall be submitted as follows:

- Completion of the attached nomination form
- Must be submitted by a Chesapeake Region Safety Council member
- Must be submitted by May 1st for the current year awards
- Is eligible to receive the award once every five years

Recognition:

Awards will be presented at the Chesapeake Region Safety Council's annual meeting in June of each year. Honorees are expected to be present to receive the award.

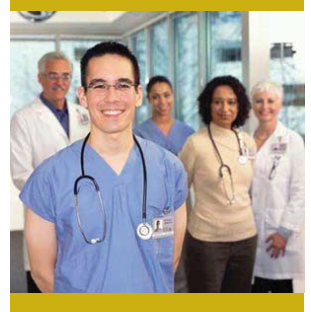
**Questions about this program can be directed to the
Chesapeake Region Safety Council**

www.chesapeakeesc.org

800-875-4770

email: safety@chesapeakeesc.org

410-281-1350



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NOMINATION FORM

CANDIDATE'S NAME: _____

TITLE: _____

COMPANY/ORGANIZATION: _____

ADDRESS: _____

CITY/STATE/ZIP: _____

PHONE (): _____ E-Mail: _____

Briefly describe nominee's current or recent Council's activities:

SUPPORTING INFORMATION: Attach a separate page to provide the information for the nomination.

This includes:

- Demonstrated Knowledge and Expertise
- Current Job Duties
- Operational Aspect
- Public/Community Services
- Codes, Standards, Legislation Committees
- Leadership/Management

SPONSOR NAME: _____

TITLE: _____

ORGANIZATION: _____

ADDRESS: _____

CITY/STATE/ZIP: _____

PHONE : _____ E-Mail: _____

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