



**2009 PROFESSIONAL OF THE YEAR
NOMINATION FORM**

NAME OF NOMINEE: _____

COMPANY/ORGANIZATION _____

ADDRESS: _____ CITY _____ STATE _____ ZIP _____

PHONE NUMBER: _____ FAX NUMBER: _____

SUBMITTED BY: _____

ADDRESS: _____ CITY _____ STATE _____ ZIP _____

PHONE NUMBER: _____ FAX NUMBER: _____

PLEASE INDICATE ON THE LINE BELOW THE NAME AND PHONE NUMBER OF THE PERSON YOU FEEL SHOULD PRESENT THE AWARD:

NAME OF PRESENTER: _____ PHONE NUMBER: _____

NOMINEES FOR PROFESSIONAL OF THE YEAR AWARDS ARE JUDGED ON THE FOLLOWING ATTRIBUTES:

1. FELLOWSHIP – WILLINGNESS TO SHARE KNOWLEDGE WITH AND HELP TRAIN FELLOW TURF PERSONNEL.
2. INVENTIVE INGENUITY – LEADERSHIP IN DEVELOPING NEW IDEAS AND TRENDS IN TURFGRASS MANAGEMENT.
3. MEMBERSHIP AND ACTIVITY IN TURF RELATED AND OTHER CIVIC ORGANIZATIONS.
4. LENGTH OF DEDICATED SERVICE TO THE TURF INDUSTRY.

IN THE SPACE PROVIDED BELOW, PLEASE INDICATE WHY YOU THINK YOUR NOMINEE IS QUALIFIED FOR AN AWARD. PLEASE SUPPORT YOUR NOMINATION WITH QUALITIES THAT PROVIDE SUPPORT TO THE ABOVE LISTED ATTRIBUTES. IF ADDITIONAL SPACE IS NEEDED, PLEASE ATTACH A SEPARATE SHEET.

PLEASE RETURN BY OCTOBER 23, 2009 TO:
 OHIO TURFGRASS FOUNDATION, AWARDS, GRANTS & SCHOLARSHIPS COMMITTEE
 1100-H BRANDYWINE BLVD • ZANESVILLE, OH 43701-7303 • PHONE: 888-683-3445 • FAX: 740-452-2552