



# CWEA TRI-COUNTIES SECTION LOCAL AWARD NOMINATION FORM

## Maintenance Worker/Laborer Person of the Year

Nominee Name: \_\_\_\_\_

Address: \_\_\_\_\_

City, Zip Code: \_\_\_\_\_

Work Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

Nominator Name: \_\_\_\_\_

Agency: \_\_\_\_\_

Address: \_\_\_\_\_

City, Zip Code: \_\_\_\_\_

Work Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

**Checklist of Awards Criteria:** You must include all for the following to be eligible for the award.

1. CWEA Member?
2. Nominee must be, or have been, employed in department where principal activity is directly to assist the wastewater treatment plant, collection systems, or environmental compliance.
3. Three copies of nomination packet.  
Highly desirable: a record of service to CWEA and the Tri-Counties Section.

**Instructions:**

1. Applicants must use the attached form. Other formats will not be accepted. Submitted material will not be returned.
2. Any number of nominees may be submitted by a single agency or nominator for this award.
3. The CWEA Tri-Counties Section Awards are coordinated by the Section Awards Chair or respective committee (if appropriate).
4. The Awards Committee shall evaluate all nominees for this award.
5. All nominees will be notified of their status prior to the TCS Awards Banquet ( In January, 2023 (exact date TBD.)
6. Send nomination forms to the Tri-Counties Section Past President & Awards Chair:

Mary Thompson  
City of Santa Barbara  
520 E. Yanonali St  
Santa Barbara, CA 93103

All Awards packets must be received **NO LATER THAN NOVEMBER 1, 2022.**  
Questions: Mary Thompson, Awards Chair, Email [mthompson@santabarbaraca.gov](mailto:mthompson@santabarbaraca.gov)

**1. NOMINEE:**

Name of Nominee: \_\_\_\_\_

Job Title: \_\_\_\_\_

Years in Position: \_\_\_\_\_

Employer: \_\_\_\_\_

Supervisor: \_\_\_\_\_

Local Section Member (Not required for this local section award.)

Yes       No      # of Years \_\_\_\_\_

List Previous Awards:

**2. SUGGESTED AWARDS CRITERIA (NOTE: Attach additional information if needed.)**

Describe Nominee's Job: include his/her functions and relationship to other employees.

What has the nominee done to improve the functioning of the work group or department?

How has this nominee been active in the local section?

What professional accomplishments had the nominee gained related to this award?

List any relevant educational background, training classes, certifications and/or licenses.

List any relevant past work experience.

Provide a summary of why this nominee deserves this award and any other comments relating to the nomination of this person.

**MAINTENANCE/LABORER PERSON OF THE YEAR SCORE SHEET**

Nominee's Name: \_\_\_\_\_

<b>Years in Profession</b>	<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>	<b>6</b>	<b>7</b>	<b>8</b>	<b>9</b>
<b>Certification/Licenses</b>	<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>	<b>6</b>	<b>7</b>	<b>8</b>	<b>9</b>
<b>Professional Membership</b>	<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>	<b>6</b>	<b>7</b>	<b>8</b>	<b>9</b>
<b>Job Functions/Relationship to Emp</b>	<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>	<b>6</b>	<b>7</b>	<b>8</b>	<b>9</b>
<b>Improvement Work Group Function</b>	<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>	<b>6</b>	<b>7</b>	<b>8</b>	<b>9</b>
<b>CWEA Local Section Activity</b>	<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>	<b>6</b>	<b>7</b>	<b>8</b>	<b>9</b>
<b>Professional Accomplishments</b>	<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>	<b>6</b>	<b>7</b>	<b>8</b>	<b>9</b>
<b>Education and Training</b>	<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>	<b>6</b>	<b>7</b>	<b>8</b>	<b>9</b>
<b>Relevant Past Work Experience</b>	<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>	<b>6</b>	<b>7</b>	<b>8</b>	<b>9</b>
<b>Nomination Summary</b>	<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>	<b>6</b>	<b>7</b>	<b>8</b>	<b>9</b>

**TOTAL POINTS:** \_\_\_\_\_

**TOTAL POINTS POSSIBLE 90**

**Total points ÷ Possible Points × 100 = \_\_\_\_\_%**

**Rated by:** \_\_\_\_\_ **Date:** \_\_\_\_\_