



BILL SIMS
President

BOYD HUGHES
Vice President

PHILLIP KLUTTS
Treasurer/Asst. Sec.

JAMES GAMMILL
Executive Director

September 19, 2012

Dear Member,

Yes, it is time once again for award nominations. It is such a great honor for us to recognize the accomplishments of you our members. If you will notice, we have changed our award nominations to make it a more simple process.

Awards are an important ORWA tradition. For us, nothing is more satisfying than having the opportunity to recognize the professionalism and accomplishments of outstanding individuals and rural water systems.

Please assist us in identifying deserving system operations specialists, managers, bookkeepers and systems for consideration for this years awards. Complete the attached form for the system or employee you wish to nominate and return to:

ORWA
P.O. Box 95349
Oklahoma City, OK 73143-5349

Nominations can be submitted via e-mail to sjohnson@okruralwater.org. Blank forms can be downloaded at www.okruralwater.org.

Submissions must be in our office no later than December 7, 2012 to allow our Awards Committee more time to review nominees. Awards will be presented at the ORWA 43rd Annual Meeting in April 2013.

Please call if you have any questions.

Sincerely,

James Gammill
Executive Director

Enclosures:
JG/sj

ORWA AWARDS NOMINATION FORM

Please complete a separate form for each Award Nomination

Submissions must be in our office by December 7, 2012.

ELIGIBILITY

System Award/Excellence in Source Water Protection – Any member system that has displayed outstanding achievement in all areas of operating a water/wastewater system.

Individual Awards – Must be employed by a member system and displays individual achievement in the category nominated.

***NOTE:** Individual nominees eligibility includes any system employee that has worked in their respective position for at least 18 months.

***NOTE:** Rookie Award eligibility includes any system employee that has worked in their respective position for at least 6 months and not more than 18 months.

*Additional Information may be requested if needed.

TYPE OF AWARD

(please check only one)

- Water System Manager System Operations Specialist Office Manager Bookkeeper
- Rookie Water Plant Operations Specialist Wastewater Plant Operations Specialist
- Excellence in Source Water Protection

Name of System or Person Nominated: _____

OFFICE INFORMATION

Date: _____

System Name: _____

County: _____

Address: _____ City: _____ State: _____ Zip: _____

Daytime Contact Phone Number: _____ E-Mail: _____

GENERAL INFORMATION

Date system began operation: _____ Date Employed: _____

Number of beginning members: _____ Number of current members: _____

Number of system employees: Clerical _____ Operation & Maintenance _____ Management _____

Please state reason for the award nomination in 300 words or less (be specific – use a separate sheet if needed):
