KATHERINE TURCOTTE PROFESSIONAL OF THE YEAR AWARD 2018 Nomination Form

Guidelines

The nominee must meet the following guidelines to be considered for the award:

- Member of MAAP in good standing.
- Must be employed in a professional setting where they use their credential—examples: treatment centers, private practice, state agency positions, prevention, criminal justice, etc.
- Must have been employed in the field for at least 2 years (an issue of consistency and reliability).
- Affirms and functions by the MAAP Ethical Standards of Certified Professionals, with no prior or pending legal/ethical violations.
- Often exceeds expectations and requirements.

Past or Pending Legal/Ethical Action: ☐ Yes ☐ No

• Has made observable and measurable contributions in their field and to MAAP as an organization.

JOMINEE.				
NOMINEE: _Please Print)	Last Name	First Name	Middle	Credential
AGENCY:				
Please Print)	Name of Agency	Location		Telephone Number
Person Submi	tting Nomination:			
		Signature (include credentia	al)	
		Printed Name		
	1	M Attn: KT Av 4785 Old	niled, Faxed or Emailed AAP vard Committee Canton Rd , MS 39211	l to:
		Fax Number	r: 601-321-2086	
		Email: inf	o@msaap.net	
Nomi	ination form m	oust be received in the	e MAAP office no later	than May 15, 2018.
		MAAP Of	fice Use Only	
MAAP Membe	er: □ Yes □ No	Expiration Date:		