

**Wisconsin Athletic Trainers' Association**  
**Awards Nomination Form**

Please check the award for which you are submitting a nomination:

- \_\_\_\_\_ Distinguished Service Award (*At least 5 years of active WATA membership*)
- \_\_\_\_\_ Outstanding Educator Award (*At least 5 years of active WATA membership*)
- \_\_\_\_\_ Honorary Membership Award (*Non athletic trainer – at least 5 years of affiliation with the WATA and/or athletic trainers in Wisconsin*)
- \_\_\_\_\_ Hall of Fame Award (*At least 15 years of active WATA membership*)

**Nominee:**

Name (include all professional credentials) \_\_\_\_\_

Title (if applicable) \_\_\_\_\_

NATA Member # of individual \_\_\_\_\_

The Nominee has been an active member of the WATA for \_\_\_\_\_ years.

Complete Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Work Phone \_\_\_\_\_ Home Phone \_\_\_\_\_

Email Address \_\_\_\_\_

**Nominator:**

Name (include all professional credentials) \_\_\_\_\_

Title \_\_\_\_\_

Complete Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Work Phone \_\_\_\_\_ Home Phone \_\_\_\_\_

Email Address \_\_\_\_\_

**Checklist to complete nomination:**

<b>Distinguished Service Award</b>	<b>Outstanding Educator Award</b>	<b>Honorary Membership Award</b>	<b>Hall of Fame Award</b>
<input type="checkbox"/> Nomination Form	<input type="checkbox"/> Nomination Form	<input type="checkbox"/> Nomination Form	<input type="checkbox"/> Nomination Form
<input type="checkbox"/> Letter of Nomination Detailing Qualifications	<input type="checkbox"/> Letter of Nomination Detailing Qualifications	<input type="checkbox"/> Letter of Nomination Detailing Qualifications	<input type="checkbox"/> Letter of Nomination Detailing Qualifications
<input type="checkbox"/> Electronic or Paper Submission of Nominee's Curriculum Vitae	<input type="checkbox"/> Electronic or Paper Submission of Nominee's Curriculum Vitae	<input type="checkbox"/> Electronic or Paper Submission of Nominee's Curriculum Vitae	<input type="checkbox"/> Electronic or Paper Submission of Nominee's Curriculum Vitae
			<input type="checkbox"/> Two Additional Letters of Support for Candidate Detailing Qualifications
			<input type="checkbox"/> *An 8x10 glossy color picture of the nominee as well as a biography (250 words or less) will be required if the nominee is selected.

Materials may be submitted to:

David Kroll  
WATA Honors and Awards Committee Chair  
University of Wisconsin Superior  
Health & Wellness Center #1242  
1810 Catlin Ave  
Superior, WI 54880  
Email: [DKroll@uwsuper.edu](mailto:DKroll@uwsuper.edu)

**Submitting materials through email, as attachments, is acceptable and encouraged.**

Nominations will be accepted between September 1 and December 1 of each year.

Nominations will not be considered complete unless all of the required materials are submitted on or before December 1.

Individuals submitting completed nominations will be notified of their award status no later than March 1.