

**Montana Agricultural Business Association
OUTSTANDING SERVICE AWARD
NOMINATION FORM**

Note: Winners are expected--if at all possible--to be at the Pesticide Workshop during the January Convention in Great Falls to receive the award.

I WOULD LIKE TO NOMINATE _____

Company _____

Address _____

City _____ State _____ Zip _____ PHONE: _____

HOW LONG HAS THIS PERSON WORKED IN THE INDUSTRY? _____

LENGTH OF TIME WITH YOUR COMPANY? _____

PERSON SUBMITTING NOMINATION _____

BRIEFLY DESCRIBE THE TYPE OF WORK HE/SHE PERFORMS?

IN YOUR OWN WORDS, GIVE SPECIFIC EXAMPLES OF OUTSTANDING WORK DONE BY THIS PERSON. TELL WHY THIS PERSON IS DESERVING OF RECEIVING THIS AWARD. (USE BACK OR ATTACH ADDITIONAL SHEETS IF NECESSARY)

Deadline is Dec. 1. Please mail to: MABA, 1806 Capital, Helena, MT 59601-4714; or fax to 449-7429. Questions?? Call 449-7391 or email mabamgea@bresnan.net