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| **Logo1.BMP** | **Alpha Mu Tau Fraternity 2019 New Member Nomination *Nominations Deadline: February 23, 2019*** |

The Alpha Mu Tau Fraternity (AMTF) is the honorary fraternity of the *American Society for Clinical Laboratory Science* (ASCLS). Our mission is to recognize ASCLS members who have made outstanding contributions to the Clinical Laboratory Science profession and to advance the profession by providing educational scholarships. AMTF collects dues and solicits member contributions to support scholarships. Membership is limited, and nomination to AMTF is a national honor. Nomination requires support from two AMTF members in good standing.

The nominee is asked to provide a complete, concise, and accurate profile of activities and contributions to the profession on this form. Information must be submitted in the sequence listed, observing format and page limitations, and the nominee’s accomplishments must total a *minimum of 110 points*. Handwritten nominations are not accepted. Nominations must be signed by the nominee and nominators, and must be transmitted electronically (*Forms submitted from the nominators’ personal e-mail addresses will be accepted as a signed form*.) Nominations must be transmitted by ***February 23, 2019*** based on postmark or electronic date. Nominees must attach a short Bio along with the application. 250 words or less are required.

**Nominee**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Name, Degree, Certification, and Title  → | | | | |
| Employer  → | | | | |
| Work Address  → | | | | |
| City  → | | State  → | | Zip  → |
| Work email  → | Work phone 1  → | | Work phone 2  → | |
| Home Address  → | | | | |
| City  → | | State  → | | Zip  → |
| Home email  → | Home phone 1  → | | Home phone 2  → | |
| Individual to whom notification of your acceptance should be sent, including their title and credentials | | | | |
| Address: | | | | |
| City, State, Zip | | | | |
| Hometown Newspaper Name and Address  → | | | | |
| City  → | | State  → | | Zip  → |
| Hometown Newspaper email  → | Newspaper phone 1  → | | Newspaper phone 2  → | |
| Nominee Signature  → | | | | |

**Nominators** (Nominators may sponsor up to two nominees per year)

We certify this nomination to be *complete and correct* and have attached a letter(s) of recommendation.

|  |  |
| --- | --- |
| Nominator 1  → | Nominator 2  → |
| Signature 1 (may be electronic)  → | Signature 2 (may be electronic)  → |
| Nominator 1 email: | Nominator 2 email: |

**Recommendations**

One reference letter from each nominator or one letter signed by both nominators is acceptable. Nominators may include comments on character traits, values, commitment, professionalism, or additional accomplishments not already on this form.

**Elected ASCLS Officer, Board Member**

List position and year(s) of term. List all years, even if accumulated points exceed the maximum.

|  |  |
| --- | --- |
| National ASCLS officer or board member (3 points per year of term) | **Points (30 Max)** |
| 1 |  |
| 2 |  |
| 3 |  |
| 4 |  |
| 5 |  |
| 6 |  |
| Regional ASCLS officer or board member (2 points per year of term) |  |
| 1 |  |
| 2 |  |
| 3 |  |
| 4 |  |
| 5 |  |
| 6 |  |
| State ASCLS officer or board member (2 points per year of term) |  |
| 1 |  |
| 2 |  |
| 3 |  |
| 4 |  |
| 5 |  |
| 6 |  |
| Total of elected ASCLS officer or board member points (30 points maximum) |  |

**Appointed ASCLS Committee/Task Force Chair or Member**

List position and year(s) of term. List all years, even if accumulated points exceed the maximum**.** Indicate if *chair or member*.

|  |  |
| --- | --- |
| National (4 points per year as chair, 2 points per year as vice-chair, 1 point per year as member) | **Points (30 Max)** |
| 1 |  |
| 2 |  |
| 3 |  |
| 4 |  |
| 5 |  |
| 6 |  |
| Regional (2 points per year as chair, 1 point per year as member) |  |
| 1 |  |
| 2 |  |
| 3 |  |
| 4 |  |
| 5 |  |
| 6 |  |
| State (2 points per year as chair, 1 point per year as member) |  |
| 1 |  |
| 2 |  |
| 3 |  |
| 4 |  |
| 5 |  |
| 6 |  |
| Total of appointed committee/task force chair or member (30 points maximum) |  |

**Attendance at Professional Society Meetings**

List year(s) you attended. List all, even if accumulated points exceed the maximum.  
*Exclude attendance at meetings required by employer.*Examples of meetings: ASCLS, CLEC, Legislative Day, AACC, AABB, ASM, CLMA, ASM, ASCP

|  |  |
| --- | --- |
| National (1 point for each year attending) | **Points (10 Max)** |
|  |  |
|  |  |
|  |  |
|  |  |
| Regional (0.5 points for each year attending) |  |
|  |  |
|  |  |
|  |  |
|  |  |
| State (0.5 points for each year attending) |  |
|  |  |
|  |  |
|  |  |
|  |  |
| Total of meeting attendance points (10 points maximum) |  |

**Delegate to ASCLS National House of Delegates**

List dates. List all, even if accumulated points exceed the maximum.

|  |  |
| --- | --- |
| List each year as a delegate (1 point for each year) | **Points (10 Max)** |
|  |  |
|  |  |
| Total of delegate points (10 points maximum) |  |

**Leadership in Professional Organizations Other Than ASCLS**

List organization, position and year(s) of term. List all, even if accumulated points exceed the maximum. NOTE that “member” in a professional organization does not qualify as evidence of “leadership”. *Exclude attendance at meetings required by employer.*Examples of Professional Organizations include laboratory societies, science organizations, healthcare organizations, etc.)

|  |  |
| --- | --- |
| Provide position title, activity, organization, and year (1 point for each year of service) | **Points (5 Max)** |
| 1 |  |
| 2 |  |
| 3 |  |
| 4 |  |
| 5 |  |
| 6 |  |
| 7 |  |
| 8 |  |
| 9 |  |
| 10 |  |
| Total points for leadership in organizations other than ASCLS (5 points maximum) |  |

**Leadership in Church, Community or Civic Organizations**

List organization, position and year(s) of term. List all, even if accumulated points exceed the maximum. NOTE that “member” in such groups does not qualify as evidence of “leadership”. (*Do not include participation in activities required by employer.)*

|  |  |
| --- | --- |
| Provide title, activity, organization, and year (0.5 point for each year of service) | **Points (5 Max)** |
| 1 |  |
| 2 |  |
| 3 |  |
| 4 |  |
| 5 |  |
| 6 |  |
| 7 |  |
| 8 |  |
| 9 |  |
| 10 |  |
| Total church, community, or civic organizations leadership (5 points maximum) |  |

**Professional Presentations**

Platform presentations or posters at scientific meetings; provide title, sponsor, dates, and hours.

|  |  |
| --- | --- |
| One (1) point per hour | **Points (10 Max)** |
| 1 |  |
| 2 |  |
| 3 |  |
| 4 |  |
| 5 |  |
| 6 |  |
| 7 |  |
| 8 |  |
| 9 |  |
| 10 |  |
| Total professional presentations (10 points maximum) |  |

**Professional Publications**

Articles, editorials, professional books, book chapters. Give title, publisher or journal, year.

|  |  |
| --- | --- |
| Peer-review articles (5 points), books (5), book chapters (3), educational articles (2), editorials (2) | **Points (10 Max)** |
| 1 |  |
| 2 |  |
| 3 |  |
| 4 |  |
| 5 |  |
| 6 |  |
| 7 |  |
| 8 |  |
| 9 |  |
| 10 |  |
| Total professional publications (10 points maximum) |  |

**Public Relations**

Presentations to church or civic groups, schools, *Medical Laboratory Professionals Week* leadership, judging science fairs, assisting in clinics, health fairs or blood drives. (*Do not include participation in activities required by employer.)*

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| --- | --- |
| Public relations activities, list activity and year (1 point for each year) | **Points (10 Max)** |
| 1 |  |
| 2 |  |
| 3 |  |
| 4 |  |
| 5 |  |
| 6 |  |
| 7 |  |
| 8 |  |
| 9 |  |
| Total public relations activities (10 points maximum) |  |

**Professional Legislative Activities**

Letters to senators and representatives, meetings with senators and representatives, licensure activities. For Legislative Day, post activity in Attendance at Professional Society Meetings.

|  |  |
| --- | --- |
| List professional legislative activity and year (1 point per activity per year) | **Points (10 Max)** |
| 1 |  |
| 2 |  |
| 3 |  |
| 4 |  |
| 5 |  |
| 6 |  |
| 7 |  |
| Total legislative activities (10 points maximum) |  |

**Professional Awards, Honors, Recognition**

Omicron Sigma, Member of the Year, scholarships, authorship awards

|  |  |
| --- | --- |
| National award (2 points for each year),Local/regional (1 point for each year), Leadership Academy Completion National (2 points), Regional (1 point), State (1 point) | **Points (10 Max)** |
| 1 |  |
| 2 |  |
| 3 |  |
| 4 |  |
| 5 |  |
| 6 |  |
| 7 |  |
| 8 |  |
| 9 |  |
| Total awards, honors, recognition (10 points maximum) |  |

**Other Significant Service to ASCLS or to the Profession**

e.g., National annual meeting chair, position paper author, editing national bylaws or Body of Knowledge.

|  |  |
| --- | --- |
| Service activity (5 points each) | **Points (10 Max)** |
| 1 |  |
| 2 |  |
| 3 |  |
| Total other service (10 points maximum) |  |

**Grand Total Points**

|  |  |
| --- | --- |
| 150 points maximum, nominee must have at least 110 points to qualify. |  |

**Completion**

**Nominees,** Congratulations for selection by your nominators for AMTF candidacy. You are being honored for your accomplishments and contributions to ASCLS and the Clinical Laboratory Science profession. AMTF is an honorary fraternity dedicated to promoting our profession through scholarships. Please review your form for completeness, accuracy, and lack of duplication; check your point selections and totals. Please *retain the format and page count*, do not modify. Note that resumes, curriculum vitae, or additional supporting documentation will NOT be accepted. **Send this form and your short Bio to your nominators upon completion.**

**Nominators** assist the nominee in completing the form and verify that it is complete and accurate. Nominators are responsible for ensuring that the form and reference letter(s) reach the Membership Committee chair in advance of the deadline. For 2019, signed nominations short Bio, and signed letters must be postmarked or emailed to the Membership committee chair no later than **February 23, 2019.** Send the form to:

|  |
| --- |
| **J.R. Constance**  AMTF President-Elect  jrc@rodricon.com |

Note: If electronic signatures are not available, forms and/or letters transmitted from the nominators’ personal e-mail addresses will be accepted.

Revised 11/18/2018 jrc