



ASSISTANT SUPERINTENDENT OF THE YEAR

Nomination Form

Please return by April 10, 2010

Name of Nominee

Address of Nominee

Name of Golf Course/Club

Address of Golf Course/Club

- 1). Brief outline of Nominee's past employment history. (Please use back of form or include on separate sheet.)
- 2). Basis for nomination (i.e. current course conditions, major projects, work ethics, significant accomplishments, work performance, etc. Please use back of form or include on a separate sheet.)

I certify that the information in these nomination papers is true, accurate and complete.

Signature of Nominator

Position of Nominator

We ask that this nomination paper be co-signed by other Board of Directors of your club/course or by other members of the Oregon Golf Course Superintendents' Association.

Co-Signed: _____

Printed Name

Co-Signed: _____

Printed Name

Signature

Signature

Dated this __ day of _____, 2010

Please return by April 10, 2010 to:

OGCSA Awards Committee
PO Box 820210
Vancouver, WA 98682