

# OhioMATYC Distinguished Service Award Nomination Form

Name of Nominee: \_\_\_\_\_

College: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_

Email: \_\_\_\_\_

Number of years of teaching experience: \_\_\_\_\_

College courses taught: \_\_\_\_\_

\_\_\_\_\_

List service to mathematics education locally, regionally, and/or nationally.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

List professional presentations and publications related to mathematics education.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Other service information (such as awards, grants, other positions held, etc.)

\_\_\_\_\_

\_\_\_\_\_

Nominator: \_\_\_\_\_

College: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_

Email: \_\_\_\_\_