

## TEXAS ASSOCIATION OF HEALTH UNDERWRITERS INDIVIDUAL NEWSLETTER AWARD

(For timeframe 01-01-2018 to 12-31-2018)

Nominee's Name: \_\_\_\_\_

Chapter:			
<b>Description:</b> The newsletter award honors a local indiversely  publication.	vidual	member fo	or an outstanding newslette
Criteria: Winners will be recognized for publications chapter activities including but not limited to 1. Organization, design and creativity of 2. New membership information 3. Association's current calendar of evolution 4. Board member information 5. Industry news 6. Legislative information 7. Continuing education information	o the foo	ollowing:	n the forefront in all areas o
Nominator's Name (Print):			
Chapter:			
Nominator's Signature:			
Nominator's Address:			
City:		_State:	Zip:
Phone:	Fax:		
Email:			
			_

Return form and award submission requirements to: TAHU Awards C/O Hoffman Insurance Group 14905 Southwest Fwy, #200 Sugar Land, TX 77478

## Must be RECEIVED no later than February 22, 2019

For questions regarding completion of this form, or other TAHU Awards matters, please contact your TAHU Awards Chair, Crystal Hoffman, at <a href="mailto:crystal@hoffmanig.com">crystal@hoffmanig.com</a> and include "TAHU Awards" in the subject.

Applications must be RECEIVED no later than the <u>close of business</u> on the due date regardless of method of delivery. Exceptions to the submission deadline MAY be approved with TAHU board approval.

Faxed or hand delivered submissions will NOT be accepted.

A copy of the submission form must accompany all submissions with points/narrative written on the submission form. Submission form should NOT be changed, retyped or reformatted. If additional space is needed, extra sheets should be attached and numbered to correspond to submission form. Packets received without applications forms/score sheets will not be considered.

Date:	Reviewed by				
<del></del>	•	(Initials)	(Initials)	(Initials)	