



TEXAS ASSOCIATION OF HEALTH UNDERWRITERS

SPECIAL SERVICE AWARD

(Outstanding Service to the Local Association for timeframe 01/01/2020 to 12/31/2020)

Nominee's Name: _____

Chapter Name: _____

Attach a letter with details of Nominee's 2020 Accomplishments.

Informational Profile:

1. Years as an Association Member: _____

2. Is he/she an active TAHU member? _____ Yes _____ No

3. Local, State, Regional and/or National levels of service – past and current.
- List Local positions and years served - List Regional positions and years served
- List State positions and years served - List National positions and years served
(Please attach separate sheet with nominee's name at top and listings requested)

4. Public Service and community activities (i.e. church, rotary, service organizations, etc.):

5. List professional industry designations received:

6. List if nominee is a past or current LPRT award winner. If so, what level and the years qualified:

7. Triple Crown Award Winner? If so, list years they qualified:

8. TAHUPAC Contributor? If so, list years they qualified:

9. Miscellaneous. (Consideration will be given for additional information you feel qualifies this person for this award):

Please attach any supporting information.

Nominator's Name (Print): _____

Nominator's Signature: _____

Nominator's Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____

Email address: _____

Return form and award submission requirements to:

TAHU Awards
c/o Nancy Dytrich
4234 N. Summercrest Loop
Round Rock, TX 78681

Must be RECEIVED no later than February 22, 2021

For questions regarding completion of this form, or other TAHU Awards matters, please contact your TAHU Awards Chair, Nancy Dytrich, at nancy@goldstein-insurance.com and include "TAHU Awards" in the subject.

Applications must be RECEIVED no later than the close of business 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.

Awards Committee use only:

Date: _____

Reviewed by _____
(initials) (initials) (initials)