



# Iowa State Horticultural Society Award Nomination Form

Selection of recipients by the Awards Committee is based on quality and quantity of the nominee' contributions to horticulture, demonstrated leadership ability, and contributions beyond the usual expectations of volunteer service and/or job duties.

Include one nominee per form. Couples must be nominated separately. Nominees must be people, not organizations. Exceptions require permission from the Awards Committee. Five prior recipients of the Honor Award serve on the Awards Committee.

Additional pages or space may be added.

Past Award Winners can be found at <http://www.iowahort.org/> and clicking on ISHS Awards & Winners

**Mail Award Nomination Form by *March 4, 2011* to:**  
**ISHS Awards**  
**Iowa State Horticultural Society**  
**4225 Fleur Drive, #135**  
**Des Moines, Iowa 50321**

**or e-mail to [ISHS Awards](#)**

Name of nominee: \_\_\_\_\_ Date: \_\_\_\_\_

Address: \_\_\_\_\_ Telephone: \_\_\_\_\_

E-mail: \_\_\_\_\_

Nominated for: **Merit Award** **Honor Award** (check one)

\_\_\_\_ Year that **Merit Award was received** (if applicable). Honor Awards are bestowed on individuals who have previously received the Merit Award and have continued to make contributions to horticulture that reach beyond their local level.

**In addition to this form, at least two letters of reference are required. List the individuals who are sending letters or whose letters are enclosed with this form:** (letters must be signed)

1. \_\_\_\_\_ 2. \_\_\_\_\_

3. \_\_\_\_\_ 4. \_\_\_\_\_

**Information about the nominee:**

**Family information and background:** Spouse's Name:,

Children (not required): \_\_\_\_\_

**List education:** (name of institution & attendance or graduation date)

**Military:** (branch & years)

**List organizational memberships:**

Horticulture:

Non-horticulture:

**List business involvement:**

Horticulture:

Non-horticulture:

Describe horticultural contributions (**identify ISHS or ISHS Affiliate Contributions**):

**Local:**

**State:**

**National:**

**International:**

Describe local community contributions:

Describe state, national, and/or international contributions:

Describe other relevant contributions:

Was this nominee receiving remuneration during the time he or she was contributing to horticulture:

**No**     **Yes (check one)**

**Explanation (not required):** \_\_\_\_\_

In the field of horticulture in Iowa, do you consider this nominee in the top:

**1%**    **10%**    **25%**    **50% (check one)**

**Explanation (not required):** \_\_\_\_\_

Name of the person and/or the ISHS affiliate organization making this nomination:

Contact person for this nomination (**if different than above**):

Address of contact person: \_\_\_\_\_

Telephone: \_\_\_\_\_ E-mail: \_\_\_\_\_