



## Nominations for Alumni Association Awards

### ***Albert Fitch Memorial Alumnus of the Year Award***

This award is presented to an alumnus of Pennsylvania College of Optometry who has distinguished himself/herself through extraordinary service and contributions to the profession of optometry, bringing honor and prestige to PCO.

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

Business Address \_\_\_\_\_

Type of Business \_\_\_\_\_

Title \_\_\_\_\_

Phone Number \_\_\_\_\_ Email \_\_\_\_\_

Reasons for Nomination (additional comments may be attached)  
\_\_\_\_\_  
\_\_\_\_\_

### ***Distinguished Service Award***

This award is presented to a non-alumnus who is closely identified with Salus University and who has provided notable service to the University and their profession.

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

Business Address \_\_\_\_\_

Type of Business \_\_\_\_\_

Title \_\_\_\_\_

Phone Number \_\_\_\_\_ Email \_\_\_\_\_

Reasons for Nomination (additional comments may be attached)  
\_\_\_\_\_  
\_\_\_\_\_

### ***Public Service Award***

This award is presented to a person (or organization), preferably of national standing, which has made a recent significant contribution to Salus University or to their profession.

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

Business Address \_\_\_\_\_

Type of Business \_\_\_\_\_

Title \_\_\_\_\_

Phone Number \_\_\_\_\_ Email \_\_\_\_\_

Reasons for Nomination (additional comments may be attached)  
\_\_\_\_\_  
\_\_\_\_\_

***Special Recognition Award***

This award is presented as special recognition of an individual's or organization's contribution to Salus University, their profession or their community.

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

Business Address \_\_\_\_\_

Type of Business \_\_\_\_\_

Title \_\_\_\_\_

Phone Number \_\_\_\_\_ Email \_\_\_\_\_

Reasons for Nomination (additional comments may be attached)  
\_\_\_\_\_  
\_\_\_\_\_

Nomination submitted by \_\_\_\_\_ Class Year \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone Number \_\_\_\_\_ Email \_\_\_\_\_

Please submit a curriculum vitae for your nominee whenever possible. Thank you for your time and interest.

Return completed form to:  
Heather S. Giampapa, Alumni Office  
Salus University  
8360 Old York Road  
Elkins Park, PA 19027  
Fax: (215) 780-1396  
Email: [hgiampap@salus.edu](mailto:hgiampap@salus.edu)  
Phone: (215) 780-1391