**Nomination Packet for the 2017 Edward (Ted) Moran Award**

**U.S. PUBLIC HEALTH SERVICE**

**ENVIRONMENTAL HEALTH OFFICER PROFESSIONAL ADVISORY COMMITTEE**

**Purpose**

The **Edward (Ted) Moran Award** recognizes an outstanding mid-level environmental health professional who consistently achieves high standards in the practice of environmental health, occupational health and safety, industrial hygiene, or radiological health.

**Eligibility**

Active duty PHS Commissioned Corps officers in the Environmental Health Officer Category at the O-4/O-5 level and Civil Service personnel at the GS-12 or GS-13 level who are engaged in the practice of environmental health, occupational health and safety, industrial hygiene, or radiological health are eligible for this award. The rank/grade of the nominee is determined at the time the nomination is submitted. Individuals promoted subsequent to the awards submission deadline will not be precluded from eligibility.

**Criteria**

Each nominee must have made an outstanding contribution in the field of environmental health thereby advancing the mission of the PHS. The nominee must have been directly involved as a principal participant in the exemplary work. This contribution should include at least one of the following accomplishments:

* Achievement of at least one significant environmental health accomplishment characterized by initiative, innovation, or impact on public health.
* The development of, or a major improvement in, a procedure, policy, or regulation which increased efficiency, reduced cost, saved time, or otherwise contributed notably to the accomplishment of an important environmental health objective.
* Superior performance in the accomplishment of assigned duties over a defined period of time which resulted in work that exceeded expected measurable objectives.

**Nomination Process**

Candidates may be nominated by supervisors, colleagues, or program managers. **The nomination should consist of a narrative not to exceed three pages (single-spaced, 12 point Times New Roman font, 1 inch margins).** **Please submit the Nomination Form with signatures in PDF format. The narrative statement should be submitted in Microsoft Word format.** The narrative should address the individual’s contributions to environmental health described in the Criteria section above. The narrative should provide specific information that describes the role the nominee played in each accomplishment noted and a clear and concise description of how these achievements made an impact on public health. All nominations must be accompanied by the Nomination Form (attached) which will serve as the nomination cover sheet. The completed nomination form and narrative must be submitted to the Chairperson of the Environmental Health Officer Professional Advisory Committee (EHOPAC) Awards and Recognition Subcommittee by **12:00 pm EST,** **March 6, 2017.**

**Selection Process**

The EHOPAC Voting Members will review all nominations and score them according to the award criteria to select the award recipient.

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**Nominee Information**

**Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Rank/Grade (identify O-4/O-5 or GS-12/GS-13):** \_\_\_\_\_\_\_\_\_\_\_ **PHS Serial #:** \_\_\_\_\_\_\_\_ **EMPLID#**\_\_\_\_\_\_\_\_\_\_\_\_\_

**PHS OPDIV/Agency:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Duty Station & Complete Mailing Address:**

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**Email address: ­­­­­­­­­**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Position title:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Registrations/Certifications:** Identify type (i.e., RS/REHS/REHP/CIH/CSP/etc.) and indicate the State or Association and list the expiration date.

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**Academic Degrees:** (List institution, degree, and graduation date)

**Professional Associations/Technical Societies:** (List memberships and any offices held)

**Name, Title, and Email Address of the Nominee’s Immediate Supervisor:**

**Signature of Immediate Supervisor: ­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 **Name, Title, and Email Address of Nominator: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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 **Signature of Nominator: ­­­­­­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Electronically submit this completed form and the narrative statement to:**

CDR Jamie Mutter

Chair, EHOPAC Awards and Recognition Subcommittee

Email: **zwy4@cdc.gov**Phone: (404) 498-6664