# Lifetime Member

The nominee for this award should be an individual recognized for their longstanding and unwavering commitment as a member in good standing. They should exhibit a notable history with the organization, marked by longevity of membership and significant contributions. Additionally, their consistent engagement and positive impact within the organization are essential. The ideal candidate will also embody the values and ethics of the organization, serving as an exemplary representative. Peer recognition for their dedication and achievements is also critical in the selection process. Please read the award Submission Guidelines.

Eligibility requires current and good-standing membership in the Association.

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| **NOMINEE:** |
| Phone: | Email: |
| Title | Organization |
| Dates of Membership: |

|  |
| --- |
| **NOMINATED BY:** |
| Phone: | Email: |
| Relationship to the nominee: |

|  |
| --- |
| **Nomination endorsed by 5 Association members in good standing:** |
| Date: |
| Date: |
| Date: |
| Date: |
| Date: |

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| **Nomination Statement:** Should document the Nominees Outstanding Leadership in Emergency Management, Innovative Use of Technology, Community Preparedness and Resilience. |
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| **Nomination Statement: Continued** |
|  |
| **Signature: Date:** |

# MUST BE SUBMITTED BY – February 29, 2024

Email To: or Mail to:

ggoebel@otoecountyne.gov Otoe Co. EMA

Phone: 402-873-9588 % Gregg Goebel 1021 Central Ave Nebraska City, Ne

**AWARD CRITERIA:**

**Longevity of Membership**: To qualify for this lifetime achievement recognition, the nominee must have been a member in good standing of the Association for a minimum of 15 Years.

**Significant Contributions**: The nominee should have a history of important contributions to Emergency Management and the Association. This includes but is not limited to, leadership roles, impactful project involvement, key initiatives, or other notable activities that have advanced Emergency Management and the Association’s mission.

**Consistent Engagement**: The nominee should have consistently engaged in Emergency Management and the Association’s activities, events, and governance over the years.

**Positive Impact**: The nominee’s work and involvement should have had a lasting and positive impact on Emergency Management, the Association, and its members, contributing to its growth, reputation, or effectiveness.

**Exemplary Representation**: The individual should embody the values and ethics of Emergency Management and the Association, serving as a role model for current and future members.

**Peer Recognition**: Ideally, the nominee should be widely recognized and respected by their Emergency Management and Association peers for their contributions and dedication.

**Membership and Standing:** The individual must be a current member in good standing with the Association.

**Nomination Statement**: Please provide a comprehensive and detailed statement outlining why the nominee deserves this award. Your statement should vividly describe specific events, initiatives, innovations, or significant achievements the nominee has accomplished in emergency management. Highlight instances where their contributions have made a notable impact. Feel free to include any supporting information that underlines their qualifications and distinguishes them as an exceptional candidate for this honor.

For your convenience, you may submit this statement on a separate sheet. Please adhere to the following formatting guidelines: use 1-inch margins all around and type your statement in Times New Roman font, size 12. This will ensure consistency and readability in the evaluation process.

**Supporting Documentation**: Attach additional documents or evidence supporting the nomination. This could include letters of recommendation, reports, news articles, or other relevant materials.

**Submission Guidelines**:

**Submission deadline: MUST BE SUBMITTED BY – February 29, 2024 Email or Mail to:**

**Email To: or Mail to:**

**ggoebel@otoecountyne.gov** **Otoe Co. EMA**

**Phone: 402-873-9588 % Gregg Goebel 1021 Central Ave Nebraska City, Ne**

**Signature and Date**:

Sign and date the form, confirming the accuracy and authenticity of the information provided.