



Gail Miller Distinguished Safety Award Nomination Form

The National Frame Building Association® (NFBA) Gail Miller Distinguished Safety Award is presented to an NFBA member or member company that makes a significant contribution to post-frame industry safety.

Criteria:

- Must be an active NFBA member or company member.
- Must have a documented safety/risk management program.

Confidentiality:

The information in Section 1, and any reference in any part of this application to a specific company, will not be included with the application when the submissions are judged. All information provided on this application will be kept in strict confidence. NFBA reserves the right to publish any innovative safety ideas from the entries, for the good of the industry. However, any company-specific information regarding accident or injury statistics, or any other information identified by the applicant as proprietary, will be kept in confidence by NFBA Legal Counsel as applying to the specific company.

Judging:

Nominees will be judged by 2–3 members of NFBA. Judges will grade nominees using a ratings/score sheet. Nominations will be stripped of any information of the form which could be used to identify the applicant.

Deadline:

The deadline for entries is **December 16, 2011**. The winner will be announced at the Frame Building Expo February 29 – March 2, 2012 in St. Louis.

Entry Submission:

Two easy ways to submit your entry:
E-mail entry form and supporting documents to awards@nfba.org
Or mail your entry form to:
NFBA—Gail Miller Award
4700 West Lake Ave.
Glenview, IL 60025

More Information:

Specific questions may be directed to the NFBA office by sending an e-mail to awards@nfba.org or by calling 800/557-6957.

Instructions:

Please complete the following information about your company nomination to receive the NFBA Gail Miller Distinguished Safety Award. Complete and accurate information will help the judges in making their determination and will likewise assist your company in receiving appropriate consideration. Feel free to attach additional paper if necessary.

Section 1: General Information

Company Name _____

Contact Name _____

Address _____

City _____ State _____ ZIP _____

Phone _____ E-mail _____

For Office Use Only: DATE RECEIVED _____ ENTRY NUMBER _____

Section 2: Company Safety Program

*****Please provide a copy of your company's safety policy statement*****

1) Does your company have a formal written safety program?

Yes No If yes, how long has it been in place? _____

2) How do you communicate your safety program to your employees? _____

3) How do you orient/train your new employees on safety? _____

4) Submit a brief statement (200 words or less) on what makes your safety program work: _____

For Office Use Only: DATE RECEIVED _____ ENTRY NUMBER _____