



GBRIA Individual Excellence in Safety Award **Nomination Form**

Nominator/Submitter: _____

Company (if any): _____

Phone/E-mail: _____

Date _____

Nominee Name (Individual up for award):

Employer (if any): _____

Facility/Location of Safety Act: _____

Mailing Address (for prize winners): _____

Phone/E-mail: _____

Nominee's Qualifying Safety Act: (please describe)



Nominator (Submitter's) Signature

Nominee Signature

(Nominee, check one)

My full name may be read on the air and posted in the Safety Excellence Hall of Fame on safenation.org

My full name **may not** be read on the air and **may not** be posted in the Safety Excellence Hall of Fame on safenation.org

GBRIA Facility Representative (Owner Representative)

Checking this box, along with a signature above, allows Safe Nation Radio to air the facility name associated with the above nominee's qualifying safety act.

*Note: Nominee and facility representative signatures are **not** required to submit a nomination. If the nominee's signature is not obtained, only their first name will be announced on air. If the facility representative signature is not obtained, the name of the facility will not be aired.*

Fax nominations to 225-769-0289 and listen to 1150 AM WJBO Saturday between 1:00 and 2:00 pm for the winner announcement.