



T E X A S  
ASSOCIATION  
OF  
BUILDERS

## Associate of the Year

### Candidate Nomination Form

Candidate's Profile
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Candidate's Name	
Membership Number	
Local Association Name	
Firm Name	
Address	
City, State ZIP Code	
Telephone Number	
Submitted By	
Date	
Signature of Local Executive Officer	

**LOCAL****STATE****NATIONAL**

<b>Committees Chaired</b> Please include names and years of involvement.			
<b>Other Committees/Council Activity</b> Please include names and years of involvement.			
<b>Board of Directors</b> Please include position held and years of involvement.			
<b>Meeting Attendance</b> Please include a brief statement estimating candidate's attendance.			
<b>Awards/Recognition</b> Please include title of award and year received.			
<b>Civic Accomplishments / Responsibilities (e.g., homes for homeless, association sponsored charities)</b> Please include years involved.			
Total Number of Spike Credits to Date		Number of Spike Credits Earned This Year	

# INDUSTRY ACCOMPLISHMENTS

Membership in Professional Organizations

Recognitions /Awards /Articles

Legislative Activity (through other professional groups)

Professional Certifications

Upgrading Professional Knowledge (Schools, Seminars, Etc.)

Other accomplishments (Attach extra sheets of paper if necessary)