



AWARDS NOMINATION FORM

to be awarded at the TAPS Annual Conference

voted on at the Fall Business Meeting

PERSON NOMINATED _____

NAME OF AWARD _____

In the space provided below please highlight the reason(s) for your recommendation/nomination. Please limit your remarks to this space.

Mail or fax form to the Tennessee Association of Professional Surveyors
607 W. Due West Avenue, Suite 96
Madison, Tennessee 37115-4420
615-860-9311 615-860-7177 Fax
tapsinc_@bellsouth.net