**ASB Rising Bakers Award:**  Please send this form, plus supporting letters and documentation, by email to the staff liaison for the Young Professionals Award Evaluation Committee’s review.

* **Email address:** tbrydebell@asbe.org
* **Subject Line:** “ASB Rising Bakers Nomination Submission”

**The following information on this page is REQUIRED.**

|  |
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| **NOMINEE CONTACT INFORMATION** |
|  |
| **Full Name of Nominee (First, MI, Last)** |
|  |  |  |
| **Date of Birth** **(mm/dd/yy)** | **Job Title** | **Company Name** |
|  |
| **Address** |
|  |
| **Address Line 2** |
|  |  |  |  |
| **City** | **State** | **Zip Code** | **Country** |
|  |  |
| **Phone Number**  | **Email Address** |

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| **NOMINATOR CONTACT INFORMATION** |
|  |
| **Full Name of Nominator (First, MI, Last)** |
|  |  |
| **Job Title** | **Company Name** |
|  |
| **Address** |
|  |
| **Address Line 2** |
|  |  |  |  |
| **City** | **State** | **Zip Code** | **Country** |
|  |  |
| **Phone Number**  | **Email Address** |

**The following information on this page is REQUIRED. If any of the following three (3) fields – *Summary Statement of Significan*ce, *Professional Positions*, and *Supporting Letters* – is left blank the nomination will not be considered by the Young Professionals Award Evaluation Committee.**

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| **SUMMARY STATEMENT OF SIGNIFICANCE ON WHICH NOMINATION IS BASED**Maximum of 300 carefully edited words that reflect why you believe your nominee should be recognized as an ASB Rising Baker. |
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| **WHOLESALE BAKING RELATED PROFESSIONAL POSITIONS** |
| **Organization** | **Position/Title** | **Dates of Employment** |
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| **SUPPORTING LETTERS**Letters from at least one (1) industry individual in addition to the nominator and no more than three (3) industry individuals whose names are listed below. Award committee members may not write supporting letters. Supporting letters may be submitted in conjunction with form or separately by the nomination deadline. All letters must be provided in a universally accepted electronic format of either a PDF or DOCX. |
| **Name** | **Affiliation** (supervisor, co-worker, vendor, client, etc.) |
|  |  |
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**The information requested on this page is OPTIONAL. Please feel free to use the fields below to further demonstrate why your young professional nominee should be recognized as an “ASB Rising Baker”.**

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| **BAKING EDUCATION** |
| **Course** | **Institution** | **Year(s)** |
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| **TECHNICAL AND PROFESSIONAL SOCIETY MEMBERSHIPS** |
| **Society** | **Dates** | **Office(s) or Volunteer Position(s) Held** |
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| **INDUSTRY HONORS/ACHIEVEMENTS/RECOGNITION**Includes awards, prizes, and speaking opportunities |
| **Award/Prize/Event** | **Date** |
|  |  |
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| **ADDITIONAL SUPPORTING MATERIALS**No more than 3 supporting items for consideration. Materials can be copies of articles, photos, videos, etc. Additional supporting materials may be submitted in conjunction with form or separately by the nomination deadline. All items must be provided in a universally accepted electronic format: PDF, DOCX, JPEG/PNG, MP4, URL. |
| **Description of Supporting Material**  |
|  |
|  |
|  |