

**NEW JERSEY MOSQUITO CONTROL ASSOCIATION, INC.**

AWARD and RESOLUTION NOMINATION FORM

- |                                                                  |                                                                   |
|------------------------------------------------------------------|-------------------------------------------------------------------|
| <input type="checkbox"/> <b>A.R. "Bunnie" Hajek, NJMCA Award</b> | <input type="checkbox"/> <b>Outstanding Mosquito Worker Award</b> |
| <input type="checkbox"/> <b>Achievement Award</b>                | <input type="checkbox"/> <b>Resolution</b>                        |
| <input type="checkbox"/> <b>Twenty-Five Year Service Roll</b>    |                                                                   |

**Award/Resolution NOMINEE:** \_\_\_\_\_ **Title:** \_\_\_\_\_

PLEASE print clearly & provide correct spelling as this will be used for any award if accepted/approved

**Note:** *Nominees who do not receive a particular award/recognition can be nominated again in the future.*

**NJ Mosquito Control Agency Affiliation:**

\_\_\_\_\_

**Brief History/Background in Mosquito Control:**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Reason(s) – Continue on the back or attach additional sheet(s) & support documentation if available/appropriate:**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Person(s) Providing Nomination:**

\_\_\_\_\_

**Best Venue for Presentation of this Award/Recognition (listed in chronological order):**

- |                                                                                                       |                                                                               |
|-------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------|
| <input type="checkbox"/> North Pesticide Applicator Re-certification Training                         | <input type="checkbox"/> South Pesticide Applicator Re-Certification Training |
| <input type="checkbox"/> NJMCA Annual Business Meeting                                                | <input type="checkbox"/> NJMCA Annual Meeting Banquet                         |
| <input type="checkbox"/> Will not be available at any of the above gatherings. Suggested Alternative: |                                                                               |

**Signature of Program Superintendent/Director/Head** \_\_\_\_\_,

for the following purpose:

- A.R. "Bunnie" Hajek, New Jersey Mosquito Control Association Award (no endorsement signature required)*
- Achievement Award (verification: 12 years and about to retire-between current and next annual meetings)*
- Twenty-five Year Service Award (verification: 25 years of service as of the annual meeting)*
- Outstanding Mosquito Worker Award (endorsement by Program Director/Superintendent)*

-----  
**Nominations are now being accepted till Sunday, January 31, 2021**

**Submit Nominations to: Judith Legg, Awards Committee Chair**

**c/o Salem County Mosquito Control, Mail: 900 Route 45, Building #4 Woodstown, NJ 08098**

**Questions call 856-769-3255 or email [judith.legg@salemcountynj.gov](mailto:judith.legg@salemcountynj.gov)**