NOMINATION FORM
FOR
SERVICE TECHNICIAN
OF THE MONTH

PLEASE PRINT

Person you are nominating _____

Amount of time the nominee has been in the apartment industry _____

Apartment Community _____

Management Company or Owner _____

Amount of time the nominee has worked at this apartment community _____

Today's date _____

Person making this nomination _____

Your title _____

Reason for this nomination (must be for outstanding service or for going above and beyond the job description or duties of the service technician) _____

_____

_____

_____

_____

Deadline for nominations is the third Tuesday of the month.
Please mail this form to: GDAA; 2555 S. Dixie Dr. Suite 100; Dayton, Ohio 45409
Or fax to: (937) 293-1180 or email to info@gdaa.org

For Maintenance Education Committee purposes only

Please circle your score for granting this award

0	1	2	3	4	5	6	7	8	9	10
doesn't qualify										most deserving

Please return by fax to (937) 293 – 1180 or email to info@gdaa.org no later than Noon on _____