## Olson-Wegner Aerospace Medicine Technician of the Year Nomination Form



Nomination must be routed through MAJCOM who will then submit their nominee to: Maj Steven T. Fosmire (steven.fosmire.2@us.af.mil) Nominator **RANK** FIRST NAME LAST NAME **DUTY TITLE EMAIL BASE MAJCOM Nominee Category AIRMAN** NCO **SNCO RANK** FIRST NAME LAST NAME **CURRENT BASE EMAIL DUTY TITLE AFSC** SEI AWARDED AWARDS/DECORATIONS SEI AWARD DATE

YEAR

SCHOOL

**DEGREE** 

<u>Criteria</u> - Any member of the Society can nominate an individual. This award recognizes and rewards outstanding individual performance in the categories of Airman(Amn - SrA), NCO (SSgt - TSgt) and SNCO (MSgt - CMSgt) to the Flight and Operational Medicine mission. Nominee packages must clearly demonstrate superior individual effort and accomplishment in flight (aviation/space) medicine. This may include exemplary accomplishments in elements of research, flight medicine clinic leadership, mishap investigation, policy, as a Squadron Medical Element (SME), and/or in the Military Treatment Facility (MTF), initiatives under the control/management of the nominee, or special aviation/space medicine unique accomplishments by assigned SME or MTF Flight Medicine personnel. Important for favorable consideration is a description of the impact each nominee had on the installation's overall flying or operational mission. Active duty and ARC are eligible to compete for these awards.

<u>Eligibility</u> - The nominee must hold the AFSC of 4NOX1X, Aerospace Medical Service Specialty, and work in Flight Medicine clinic, or be in direct support of flight surgeons in areas of aviation medicine, research, investigation, policy development, education, or safety. The nominee must have demonstrated exceptional duty performance and professionalism. The category will be determined by the rank the individual held during the majority of the award period.

Nomination Narrative - Please submit for accomplishments in the past calendar year, limited to one page. The nomination package may be supported by two letters of recommendation, each not longer than one page in length. These recommendations should include an endorsement from the nominee's medical group commander and one from the flying squadron commander. All submissions must be electronic, Times New Roman, 12 font.

NOMINATOR SIGNATURE	DATE

## NOMINATION NARRATIVE