IEEE Outstanding Branch Counselor/Advisor Award Nomination Form

A. Region **IEEE Canada - Region 7** School Code_____

Branch/Branch Chapter Name _____

Counselor/advisor's Name _____ and IEEE member # _____

Address_____

Tel _____ Fax _____Email _____

Number of years serving as counselor/advisor _____

B. **Student Chair's Name** _____ and IEEE member # _____
(to serve as contact for IEEE staff)

Address (circle one) Home School _____

_____

Tel _____ Fax _____Email _____

C. **Supporting documentation** should be enclosed (circle yes or no)

Student essay	yes	no
Petition endorsement	yes	no
Letters of recommendations	yes	no
Biography	yes	no

D. **Branch or Branch Chapter Facts**

Number of students now in branch/branch chapter	_____	
Number of students now in department	_____	
Number of student members last year	_____	
Number of student members two years ago	_____	
Annual Report submitted	yes	no
Annual Plan submitted	yes	no

E. **Name of Institution President** _____

Address _____

Tel _____ Fax _____Email _____

Submit to:

IEEE Regional Activities
Attn: Student Services Manager
445 Hoes Lane, PO Box 1331
Piscataway, NJ 08855-1331 USA

Telephone 1 732 562 5523
Fax 1 732 463 3657
E-Mail student-services@ieee.org