

2010 Scriven Young Investigator Award Nomination Form

Nomination forms plus all supporting documentation must be mailed electronically by July 1, 2010

DESCRIPTION

The L.E. Scriven Young Investigator Award is given in recognition of outstanding sustained achievements or one-time breakthroughs in the area of continuous liquid film coating science and technology. Those nominated for this award must be forty years old or younger *at the time of the award*. The award (a plaque and \$500) will be presented at the Honors Luncheon of the 15th ISCST Symposium, September 12-15 2010, St Paul MN

The award is sponsored by the International Society of Coating Science and Technology.

BACKGROUND DATA

Name of Nominee _____ Date of Birth _____
Present Position (title) _____ Telephone () _____
Company _____ E-mail _____
Street Address _____
City _____ State _____ Zip _____

EDUCATION

University/Institution	Degree	Year/Major
_____	_____	_____
_____	_____	_____
_____	_____	_____

EMPLOYMENT HISTORY

Company or Institution	Position or Title	Dates
_____	_____	_____
_____	_____	_____
_____	_____	_____

TECHNICAL AND PROFESSIONAL SOCIETY MEMBERSHIP AND OFFICES

ACADEMIC AND PROFESSIONAL HONORS (include awards and prizes, membership in honorary societies, and date the honor was received)

CITATION

Proposed citation (not more than 25 carefully edited words that reflect specific accomplishments)

QUALIFICATIONS

Please attach sheets providing the following information on the nominee

1. Identification and evaluation of the accomplishments on which the nomination is based (maximum of two pages).
2. Selected bibliography (listing of books, patents, and major papers published). Please do not send reprints of papers or patents.

SUPPORTING LETTERS

Letters from no more than four individuals whose names are listed below. The Tallmadge Award Committee members may not write supporting letters.

NAME	AFFILIATION
1. _____	_____
2. _____	_____
3. _____	_____
4. _____	_____

NOMINATOR

1. Name of Nominator _____ Today's Date _____
 2. Present Position (title) _____ Telephone () _____
 Company _____ E-mail _____
 Street Address _____
 City _____ State _____ Zip _____

Nominator's Signature _____

Send 1 copy of this form, supplemental sheets, and supporting letters to

Dr. W. B. Kolb
 3M Company, St Paul, MN 55144
 E-mail: wbkolb@mmm.com

E-MAIL SUBMISSIONS (WITH ELECTRONIC SUPPORTING DOCUMENTS).
 NOMINATION MUST BE RECEIVED BY JULY 1, 2008