



# TEXAS ASSOCIATION OF HEALTH UNDERWRITERS

## VOLUNTEER OF THE YEAR

(Outstanding Service to the State, Regional or National Association  
for timeframe 01/01/2020 to 12/31/2020)

*The nominee for this award should be an individual member who volunteers numerous hours to the Association through dedicated service at the State, Regional or National level.*

**Nominee's Name:** \_\_\_\_\_

**Chapter Name:** \_\_\_\_\_

Attach a letter with details of the nominee's 2020 accomplishments. Please attach all supporting documentation.

### Informational Profile:

1. Years in the insurance industry: \_\_\_\_\_

2. Is he/she an active TAHU member? \_\_\_\_\_ Yes \_\_\_\_\_ No

3. Credentials. List earned designations, special education, etc.:

4. Past positions held at the State, Regional, or National level or with other organizations:

5. Outline of State, Regional and/or National Association accomplishments:

Chapter Name: \_\_\_\_\_

Nominator's Name (Print): \_\_\_\_\_

Nominator's Signature: \_\_\_\_\_

Nominator's Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email address: \_\_\_\_\_

Return form and award submission requirements to:

**TAHU Awards**  
c/o Nancy Dytrich  
4234 N. Summercrest Loop  
Round Rock, TX 78681

<b>Must be RECEIVED no later than April 5, 2021</b>
---

For questions regarding completion of this form, or other TAHU Awards matters, please contact your TAHU Awards Chair, Nancy Dytrich, at [nancy@goldstein-insurance.com](mailto:nancy@goldstein-insurance.com) and include "TAHU Awards" in the subject.

Applications must be RECEIVED no later than the close of business on the due date regardless of method of delivery. Exceptions to the submission deadline MAY be approved with TAHU board approval. Faxed or hand delivered submissions will NOT be accepted.

A copy of the submission form must accompany all submissions, with points/narrative written on the submission form. Submission form should NOT be changed, retyped or reformatted. If additional space is needed, extra sheets should be attached and numbered to correspond to submission form. Packets received without applications forms/score sheets will not be considered.

*Awards Committee use only:*

Date: \_\_\_\_\_

Reviewed by \_\_\_\_\_  
*(initials)*    *(initials)*    *(initials)*