

DALE GRIEB SAFETY AWARD NOMINATION FORM

Use this form to nominate an individual or group for the annual Dale Grieb Safety Award. The nominator fills out Sections A, B, C, and D. Once those sections are complete the nominator emails the form to wgervasi@princeton.edu.

In honor of the late Dale Grieb, Safety Officer and Director of Administration and Services for SEAS, the *Dale Grieb Safety Award* recognizes members of the SEAS community who have made a substantive & positive contribution to improving laboratory and/or workplace safety within the School. This annual award recognizes an individual or a group within the School of Engineering and Applied Science and is intended to acknowledge an outstanding commitment to ensuring laboratory and/or workplace safety, as was Dale's passion.

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Section	A. P	lominee	intorm	เลtเดท

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Employee Name (or Research Group):	Employee ID:		Date:		
Position Title:		Department/Center:			
Section B. Nominator Information					
Name:		Position Title:			
Department/Center:		Department Number:			
Section C. Compliance Questions					
Check the applicable boxes below to con	firm the <i>Dale Grieb Sa</i>	fety Award is appropriate f	for consideration	1.	
Does the nomination acknowledge a spe	cific safety accomplish	ment by an individual or gr	oup?	YES	NO
Does the nominee demonstrate personal	leadership in laborato	ry and/or workplace safety	/?	YES	NO
Does the nominee have a record of sustained excellence in laboratory and/or workplace safety? YES NO				NO 🗌	
Does the nominee demonstrate a commi	tment to personal safe	ety and the safety of others	?	YES	NO
If you answered <u>YES</u> to one or more of the Continue to Section D.	e above questions, the	e nominee may be eligible	for the annual <i>Do</i>	ale Grieb Safety	Award.

Section D. Description of Nomination

Dale Grieb Safety Award: Describe the nominee's substantive and positive contribution to improving laboratory and/or workplace safety within the School of Engineering and Applied Science. Include specific examples of how the nominee's efforts promoted, improved, and ensured laboratory and/or workplace safety.

(Please attach a separate page if additional space is required)





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Name of Nominator and Signature:	Date:
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