

The American Institute of Constructors College of Fellows Nomination Form

Fellowship is the highest honor offered to a member of the Institute. It is limited to those persons who are sufficiently advanced in their careers to have demonstrated a consistent pattern of professional performance and whose inclusion in the College of Fellows will bring added distinction to that body.

To be considered a Fellow, one must possess a distinguished background of service to the Institute, as well as maintained an AIC classification of Constructor for at least ten years. A Fellow must be at least forty years of age, hold a position of eminence in the profession, and be elected by at least three-quarters of the Fellows in good standing.

Nomination Procedure:

Only Fellow or Constructor members are eligible to nominate or second the nomination for Fellowship. The accompanying form must be completed in full and be submitted to the National Office at least 60 days prior to an annual forum. Applications will not be carried over to the next year. Members may not nominate themselves.

Nominee's Name: _____ Membership Number: _____

Employer: _____

Business Phone: _____ Home Phone: _____

First Membership Classification: _____

Positions held in AIC, with dates: _____

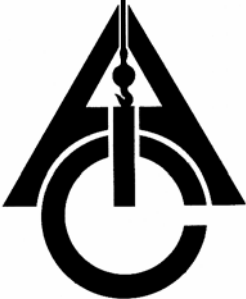
Other distinguished service to AIC: _____

Current Position in the Profession of Construction, time in that position: _____

Previous Positions in construction, with dates and duties: _____

Service to the Profession: _____

Additional Information: _____



Education Institutions, with dates: _____

Service to community, church, government or other contributions: _____

All nominations must be signed by the nominator and a seconder. Additional letters may accompany nomination.

Nominator's Name: _____ Membership Number: _____

Position: _____ Address: _____

City: _____ State: _____ Zip: _____

Business Phone: _____ Home Phone: _____

Signature: _____

Secunder's Name: _____ Member Number: _____

Position: _____ Address: _____

City: _____ State: _____ Zip: _____

Business Phone: _____ Home Phone: _____

Signature: _____

Send to AIC National Office, P.O. Box 26334, Alexandria, VA 22314.



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