



## Award Nomination

Canadian Institute for Non-destructive Evaluation, 135 Fennell Avenue West, Hamilton, ON, L9C 0E5 ph: 905-387-1655 fax: 905-574-6080

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We three undersigned members in good standing with the Canadian Institute for Non-destructive Evaluation hereby nominate the individual identified below for consideration for the following award:

W.E. Havercroft  CINDE Fellow  Technical Achievement  Canadian NDT Research

### Part A - Nominee Information

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

Company: \_\_\_\_\_

Title: \_\_\_\_\_ Valid CINDE ID Number: \_\_\_\_\_

Business Address: \_\_\_\_\_  
\_\_\_\_\_

Business phone: \_\_\_\_\_ Work email: \_\_\_\_\_

Home Address: \_\_\_\_\_  
\_\_\_\_\_

Home phone: \_\_\_\_\_ Home email: \_\_\_\_\_

Sponsor Members (3 required)

| Name (please print) | Valid CINDE ID Number | Signature |
|---------------------|-----------------------|-----------|
| 1. _____            | _____                 | _____     |
| 2. _____            | _____                 | _____     |
| 3. _____            | _____                 | _____     |

Approved by CINDE Nomination and Awards Committee on \_\_\_\_\_

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|                           |                       |           |
|---------------------------|-----------------------|-----------|
| _____                     | _____                 | _____     |
| Chair Name (please print) | Valid CINDE ID Number | Signature |

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\* Complete all applicable sections. If additional space is needed please attach separate pages or files.



## Award Nominee / Recipient Information

Canadian Institute for Non-destructive Evaluation, 135 Fennell Avenue West, Hamilton, ON, L9C 0E5 ph: 905-387-1655 fax: 905-574-6080

### Part B - Nominee / recipient information\*

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|---|
| <b>1. CINDE Support and Participation</b>   |
| <b>2. Significant accomplishments in quality and non-destructive testing (NDT)</b>  |
| <b>3. Other professional achievement in related areas.</b>  |
| <b>4. Honours and awards received</b>   |
| <b>5. Papers published or lectures presented</b>  |
| <b>6. Membership or participation in other technical societies</b> (Society name and number of years)<br>1. _____<br>2. _____<br>3. _____ |

Please complete and return this form to the attention of the Chair, Nomination and Awards Committee,

c/o Canadian Institute for Non-destructive Evaluation  
135 Fennell Avenue West, Hamilton, ON L9C 0E5  
Phone 905-387-1655 or 1-800-964-9488  
Fax 905-574-6080 Email nominations@cinde.ca

\* Complete all applicable sections. If additional space is needed please attach separate pages or files.