**ISIF INVESTIGATOR AWARD NOMINATION FORM**

INTERNATIONAL SOCIETY FOR INFORMATION FUSION

E-mail completed form and curriculum vita to ISIF Award Chair, Dale Blair, at dale.blair@gtri.gatech.edu

1. **NAME OF CANDIDATE**

 LAST, First, Middle

PRESENT OCCUPATION

 Position Organization

*This Form and Confidential References Must be Received by January 31, 2016.*

PREFERRED MAILING ADDRESS  Business Home ISIF MEMBER: \_\_Yes \_\_\_\_\_No

MAILING ADDRESS

City/State/Province Zip/Postal Code Country

BIRTHDATE YEARS OF ISIF MEMBERSHIP \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

TELEPHONE\_\_+ FAX + EMAIL

2. **EDUCATION**

Educational Institution Location Degrees Year

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3. **PROFESSIONAL HISTORY.** Current position first. LIMIT COPY TO SPACE PROVIDED; if necessary, cite only most recent positions.

From (year) to (year) Name of Employer Position Held and Responsibilities

2017 – Present

2014 – 2017

4. **NOMINATOR:**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 NAME (Signature) DATE

Prof. ISIF MEMBER: \_\_Yes \_\_\_\_No

NAME (Prof./Dr./Mr./Mrs.) (Print)

 ADDRESS

 + +

 TELEPHONE FAX EMAIL

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DATE\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

NAME OF CANDIDATE \_\_\_

5. **EVIDENCE OF TECHNICAL ACCOMPLISHMENTS IN THE FIELD OF INFORMATION FUSION (LIMITED TO 600 WORDS).**

6. **EVIDENCE OF SERVICE IN THE FIELD OF INFORMATION FUSION (LIMITED TO 400 WORDS)**

7. **EVIDENCE OF LEADERSHIP IN THE FIELD OF INFORMATION FUSION (LIMITED TO 200 WORDS).**

8. **PROPOSED CITATION (LIMITED TO 20 WORDS)**

9. **AWARD REFERENCES.** List alphabetically the complete names and contact information of a minimum of 3 (maximum of 5) references.