**NATA Honors & Awards Candidate Advocate Form**

*NATA Honorary Member*

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| **Candidate Information** |
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| **Name** |       |
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| **Advocate Information** |
|  |
| **Name** |  |
| **Employer** |  |
| **Occupation** |  |
| **E-mail** |  | [ ]  Home [ ]  Work |
| **Phone** |  | [ ]  Home [ ]  Work [ ]  Cell |
| **Relationship to candidate** |  | **Years known** |  |
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| **Please answer the following questions candidly and completely, to provide an illustration of the impact the candidate’s contributions have made.** |
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| 1. **How has the candidate impacted you, your organization or your community in regards to athletic training?**

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| 1. **How have the candidate’s activities and contributions served to advance the athletic training profession and/or positively impacted the quality of health care provided by athletic trainers?**

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| 1. **In your opinion, what has been the candidate’s most significant contribution to the athletic training profession? What was the result of this contribution and who did it impact?**
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