



The Pittsburgh Section of the American Chemical Society
Distinguished Service Award

Purpose: To recognize outstanding volunteer service to the Pittsburgh Section of the American Chemical Society.

Eligibility: Members of the Pittsburgh Section, past or present, who have provided outstanding service in advancing the Pittsburgh Section, are eligible for consideration.

Submitting a nomination: Submit each of the following: (1) attached nomination form, (2) up to two support forms, and (3) biographical sketch (or curriculum vitae) by **August 16, 2026**. All nomination materials should be emailed to the Pittsburgh Section Chair-Elect, Niharika Botcha, at nbotcha@andrew.cmu.edu

Additional information: For more information on the Distinguished Service Award and previous recipients, please visit www.pittsburghacs.org/awards/distinguished-service/, or email Niharika Botcha at nbotcha@andrew.cmu.edu



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Distinguished Service Award

NOMINATION FORM

Note: Any individual may nominate or support *only* one nominee for this award in any given year. Please complete all fields.

NOMINATOR INFORMATION

| | | | |
|--------------------------------------|-----------|-----|--|
| First Name | Last Name | | |
| Company or Institutional Affiliation | | | |
| Present Position (Exact Title) | | | |
| Address | | | |
| City | State | Zip | |
| Telephone | Fax | | |
| Email | | | |

Signature

Date

NOMINEE INFORMATION

| | | |
|--|-----------|-----|
| First Name | Last Name | |
| Local Section | | |
| Company or Institutional Affiliation | | |
| Present Position (exact title) | | |
| Address | | |
| City | State | Zip |
| Telephone: (business) | (home) | |
| Fax | Email | |
| Website | | |
| Has this nomination been discussed with the nominee? Yes <input type="radio"/> No <input type="radio"/> | | |

RECOMMENDATION

In the space below or on an at attached sheet, write a narrative summary evaluating the nominee's outstanding service in advancing the Pittsburgh Sections. Explain why the nominee is being recommended for this award with reference to the stated purposes of the award.



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SUPPORT FORM

Note: An individual may nominate or support *only one* nominee for this award in any given year. Please complete all fields.

Nominee Name:

SUPPORTER INFORMATION

| | | |
|--------------------------------------|-----------------|-----|
| First Name _____ | Last Name _____ | |
| Company or Institutional Affiliation | | |
| Present Position (exact title) | | |
| Address | | |
| City | State | Zip |
| Telephone | Fax | |
| Email | | |

STATEMENT OF SUPPORT

On a separate sheet, type a brief narrative summary describing how you know the nominee and the basis for your support of this nomination.

Signature

Date